## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N27751

(9)

CHURCH OF THE TRINITY, METROPOLITAN COMMUNITY CHURCH, INC.

URCH,	INC.		E ARANKOK BER KADA KRAN KARAK LARRI BIRAL KIRI BURIK BIRAK DIRAK DERUK BIRAK DARK				
Principal Place of Business 7225 N LOCKWOOD RIDGE RD SARASOTA FL 34243		Mailing Address 7225 N LOCKWOOD RIDGE RD 8ARASOTA FL 34243		פום אופום ושנו אשוום וספטו אוספו אופנו פום ישנווסטו ו	))) Blott Blatt Blott Dibit 1881		
				3. Date Incorporated or Qualified 06/04/1988			
				4. FEI Number	Applied For		
				23-7094543	Not Applicable		
2. Principal Place of Business		2a. Mailing Addres	3	6. Certificate of Status Desired KX	\$8.75 Additional Fee Required		
Suite, Apt. #, etc.		Suite, Apt. #, et	D	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
City & State		City & State		7. Is this nonprofit corporation a homeowners association?			
Zip 24	Country 25	Zip <b>29</b>	Country 30	This corporation owes or has paid the our Personal Property Tax due June 30.	rent year Intangible Yes 🔣 No		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
KEIN, REV. G 7225 N. LOCKWOOD RIDGE RD. SARASOTA FL 34243			81 Name 82 Street A 83	82 Street Address (P.O. Box Number is Not Acceptable)			
					-T		

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											
SIGNATURE Signature, typed or printed name of registered egent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
12.	OFFICERS AND DIRECT		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	IS IN 12					
TITLE	D	DELETE	1.1 TITLE	President	Change	☐ Addition					
NAME	DEMARCO, LOU J		1.2 NAME	Rev. Gustave G. Kein							
STREET ADDRESS	6101 - 34TH ST. W. #12G		1.3 STREET ADDRESS	7225 N. Lockwood Ridge	Rd.	·					
CITY-ST-ZIP	BRADENTON FL		1.4 CITY-ST-ZIP	Sarasota, FL 34243							
TITLE	D	DELETE	2.1 TITLE	Clerk	Change	Addition					
NAME	CLAYTON, SUE		2.2 NAME	Michael Albrecht		••					
STREET ADDRESS	6024 - 28TH ST. W.		2.3 STREET ADDRESS	5316 5th St. Ct. E.							
CITY-ST-ZIP	BRADENTON FL		2.4 CITY-ST-ZIP	Bradenton, FL 34203							
TITLE	D	DELETE	3.1 TITLE	Director	Change	Addition					
NAME	CRAWFORD, RON		3.2 NAME	Karen Patriarca							
STREET ADDRESS	3034 - <b>59</b> TH ST.		3.3 STREET ADDRESS	2289 Seward Circle							
CITY-ST-ZIP	SARASOTA FL		3.4. CITY-ST-ZIP	Sarasota, FL 34234							
TITLE	D	☐ DELETE	4.1 TITLE	Treasurer	Change	Addition					
NAME	Mrazik, Michael		4.2 NAME	Lou J. DeMarco	AA						
STREET ADDRESS	6731 WASHINGTON PLACE		4.3 STREET ADDRESS	6305 Spyglass Ln.							
CITY - ST - ZIP	BRADENTON FL		4.4 CITY-ST-ZIP	Bradenton, FL 34202							
TITLE	C	☐ DELETE	5.1 TITLE	brademoon, ru 34202	☐ Change	Addition					
NAME	MILLER, VICKIE		5.2 NAME								
STREET ADDRESS	1408V 37TH ST. CT. W.		5.3 STREET ADDRESS								
CITY-ST-ZIP	BRADENTON FL		5.4 CITY-ST-ZIP								
TITLE	D	DELETE	6.1 TITLE		☐ Change	Addition					
NAME	FISHER, LINDA		6.2 NAME								
STREET ADDRESS	2698 • 60TH AVE. TERR. W.		6.3 STREET ADDRESS								
	DOADENTON EI										

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Statutes 13 if the post of the corporation or the receiver of the corporation of the corporation of the corporation of the corporation or the receiver of the corporation of the

SIGNATURE

ROW AS HER PROSPORTE TRINITY MCC 4/1/25917355-1

CIRCLE (1997)

**FILED** 

Apr 15 1998 8:00am

Secretary of State