2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2007
Secretary of State

DOCUMENT# N41138

Entity Name: CHURCH OF OUR SAVIOR, METROPOLITAN COMMUNITY CHURCH, INC.

Current Principal Place of Business:

2011 S FEDERAL HWY
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

2011 S FEDERAL HWY
BOYNTON BEACH, FL 33435 US

New Mailing Address:

FEI Number: 65-0238758 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BELL, RENWICK REV
2011 S FEDERAL HWY
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: OM ( ) Delete
Name: VITALE, FRANK D
Address: 3759 MIL POND COURT
City-St-Zip: GREENACRES, FL 33463

Title: V ( ) Delete
Name: STAPS, HARRY
Address: 6700 NORTH OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

Title: P ( ) Delete
Name: BELL, RENWICK J REV
Address: 2011 S FEDERAL HWY
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D ( ) Delete
Name: SLOCUM, JOANNE
Address: 12339 PLEASANT GREEN WAY
City-St-Zip: BOYNTON BEACH, FL 33437

Title: S ( ) Delete
Name: SMITH, ALVIN
Address: 905 SW 18TH ST
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D ( ) Delete
Name: LAFLEUR, KEN
Address: 14897 SUMMERSONG LANE
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change ( ) Addition
Name: BROWN, BRETT
Address: 3560 LAZY PINE WAY #B2
City-St-Zip: LAKE WORTH, FL 33463

Title: D (X) Change ( ) Addition
Name: YON, DANI REV
Address: 1814 15TH AVE NORTH
City-St-Zip: LAKE WORTH, FL 33460

Title: D (X) Change ( ) Addition
Name: CLEMMITT, MARCIA
Address: 12362 PLEASANT GREEN WAY
City-St-Zip: BOYNTON BEACH, FL 33437

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK D VITALE OM 04/14/2007

Electronic Signature of Signing Officer or Director — Date