

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41559

FILED
May 13, 2009
Secretary of State

Entity Name: SAINT JOHN THE APOSTLE, METROPOLITAN COMMUNITY CHURCH, INC.

Current Principal Place of Business:

3049 MCGREGOR BLVD
FORT MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 6779
FT MYERS, FL 33911 US

New Mailing Address:

FEI Number: 65-0230168 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FILIZZI, STEPHEN REV
3049 MCGREGOR BLD
FORT MYERS, FL 33901 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: DS () Delete
Name: MILLARD, CHARLOS
Address: 8720 DART MONTH ST.
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: KINCHEN, RONALD
Address: 13269 TALL PINE CIRCLE
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: LEWIS, JOHN
Address: 5721 INVERNESS CIRCLE
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D () Delete
Name: MOSTOWSKI, KATHLEEN
Address: 203 SHENANDOAH LANE
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D () Delete
Name: TORRES, NIVIA
Address: 2709 SHELBY PKWY.
City-St-Zip: CAPE CORAL, FL 33904

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MILLARD, CHARLES
Address: 8720 DART MONTH ST.
City-St-Zip: FORT MYERS, FL 33907

Title: DS (X) Change () Addition
Name: HENNINGER, MARY
Address: 9291 CENTRAL PARK DR #105
City-St-Zip: FORT MYERS, FL 33919

Title: D (X) Change () Addition
Name: NOLAN, CHRISTINE
Address: 2335 SUMMERSWEET DRIVE
City-St-Zip: ALVA, FL 33920

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

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

Title: D () Change (X) Addition
Name: SCHARBROUGH, JOHN
Address: 4060 RAINBOW DRIVE
City-St-Zip: FORT MYERS, FL 33916

I hereby certify that the information supplied with this filing does not qualify 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: STEPHEN FILIZZI

_____ Electronic Signature of Signing Officer or Director

C

05/13/2009

_____ Date