## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N93000000733

Entity Name: HOPE METROPOLITAN COMMUNITY CHURCH, INC.

FILED Feb 20, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 500 S. RIDGEWOOD AVE DAYTONA BEACH, FL 32114 US **Current Mailing Address: New Mailing Address:** 500 S. RIDGEWOOD AVE DAYTONA BEACH, FL 32114 US FEI Number: 59-3026895 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LYNCH, JAMES M 75 BROOKWOOD DR. ORMOND BEACH, FL 32174 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete MARTELL, HELEN MARTELL, HELEN Name: Name: 500 S. RIDGEWOOD Address: 8 RED MAPLE CIRCLE Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: ORMOND BEACH, FL 32174 Title: () Delete Title: () Change () Addition LYNCH, REV. JAMES M Name: Name: Address: 75 BROOKWOOD DR. Address: City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition EAULE, BONNIE WETHERALD, STAN Name: Name: Address: **5613 DEVEN** Address: 1320 FLEMING AVE, #B-13 City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: ORMOND BEACH, FL 32174 Title: () Delete Title: () Change () Addition Name: BRAYTON, SALLY Name: 1509 STATE AVE., #Q Address: Address: City-St-Zip: HOLLY HILL, FL 32117 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition CORLIS, JERRY Name: Name: 1311 CENTER AVENUE Address: Address: DAYTONA BEACH, FL City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES M. LYNCH PRES 02/20/2002