#### 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008512

Entity Name: METROPOLITAN MINISTRIES FOUNDATION, INC.

**FILED** Feb 20, 2025 Secretary of State 5824361810CC

### **Current Principal Place of Business:**

2002 NORTH FLORIDA AVENUE

TAMPA, FL 33602

## **Current Mailing Address:**

2002 NORTH FLORIDA AVENUE TAMPA. FL 33602

FEI Number: 20-3535998 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

JAMES, MOLLY COO 2002 N FLORIDA AVE TAMPA, FL 33602 US

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: MOLLY JAMES 02/20/2025

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title **CHAIRMAN** Title PRESIDENT, EMERITUS SILBIGER, MARTIN HINTZMAN, MORRIS E Name Name

2002 NORTH FLORIDA AVENUE 2002 NORTH FLORIDA AVENUE Address Address

TAMPA FL 33602 TAMPA FL 33602 City-State-Zip: City-State-Zip:

Title MMI BOARD LIAISON Title **TREASURER** Name FARRIOR, PRESTON REDMOND, DAVID Name

Address 2002 NORTH FLORIDA AVENUE Address 2002 N FLORIDA AVENUE

TAMPA FL 33602 City-State-Zip: TAMPA FL 33602 City-State-Zip:

Title **CFO** VC Title

Name WAGNER, STACY Name BASHAM, ROBERT Address 2002 N FLORIDA AVE 2002 NORTH FLORIDA AVENUE Address TAMPA FL 33602 City-State-Zip:

TAMPA FL 33602 City-State-Zip:

Title DIRECTOR Title DIRECTOR

COUGHLIN, GERRY Name FOWLER, ELIZABETH Name

Address 2002 N. FLORIDA AVENUE Address 2002 N. FLORIDA AVENUE METROPOLITAN MINISTRIES INC

METROPOLITAN MINISTRIES INC

TAMPA FL 33602 City-State-Zip: City-State-Zip: TAMPA FL 33602

# Continues on page 2

I hereby 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 all other like empowered.

02/20/2025 SIGNATURE: MORRIS HINTZMAN **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name THOMAS, ASHLEY Name STRAZ, KEEBLER

Address 2002 N FLORIDA Address 2002 N FLORIDA AVENUE

City-State-Zip: TAMPA FL 33602 City-State-Zip: TAMPA FL 33602