2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000007981

Entity Name: OPEN CIRCLE METROPOLITAN COMMUNITY CHURCH, INC.

FILED May 07, 2016 **Secretary of State** CC1892914977

Current Principal Place of Business:

12332 SE NATHAN MAYO HWY BELLEVIEW, FL 34420

Current Mailing Address:

P O BOX 536

OXFORD. FL 34484

FEI Number: 27-2449406 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BRUNE, PAUL 5435 SE 43RD COURT OCALA, FL 34480 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: PAUL BRUNE 05/07/2016

Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PASTOR** Title VICE-MODERATOR LYNCH, JAMES Name COX, HEATHER Name

15706 SW 46TH CIRCLE Address 1145 EAGLES LANDING Address

City-State-Zip: LEESBURG FL 34748 MARION OAKS FL 34473 City-State-Zip:

Title ASST. TREASURER Title **TREASURER** Name FUMICELLO, TOM Name BRUNE, PAUL

Address 10813 SE 51ST AVENUE Address 5435 SE 43RD COURT BELLEVIEW FL 34420 City-State-Zip: OCALA FL 34480 City-State-Zip:

Title **OTHER** Title **CLERK**

Name CHERRY, NOREEN Name PALERMO, ANGEL Address 1431DUNCAN DR

City-State-Zip: THE VILLAGES FL 32162 City-State-Zip: BELLEVIEW FL 34420

Title **OTHER**

Address

ZAPPA, LINDA Name

1141 GOLDEN GROVE DR Address THE VILLAGES FL 32162 City-State-Zip:

9430 SE 110TH STREET ROAD

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.

05/07/2016 SIGNATURE: PAUL BRUNE TREASURER

Date