2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2016
Secretary of State
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Entity Name: METROPOLITAN COMMUNITY CHURCH OF THE PALM BEACHES, INC.

Current Principal Place of Business:

4857 NORTHLAKE BLVD.
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

4857 NORTHLAKE BLVD.
PALM BEACH GARDENS, FL 33418 US

FEI Number: 41-2025538

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, LEA REV. DR.
4857 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33418 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: REV. DR. LEA BROWN 01/07/2016

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	VICE MODERATOR
Name	AVATO, RICHARD
Address	4857 NORTHLAKE BLVD.
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	SECRETARY/CLERK
Name	SANDERS, MALCOLM J
Address	4857 NORTHLAKE BLVD
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	TREASURER
Name	SMITH, KIMBERLY
Address	4857 NORTHLAKE BLVD.
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	DIRECTOR
Name	ELLSWORTH, LUANN
Address	4857 NORTHLAKE BLVD.
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	DIRECTOR
Name	MORGAN, CARMEN
Address	4857 NORTHLAKE BLVD.
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	DIRECTOR
Name	O'CONNOR, TRACIE
Address	4857 NORTHLAKE BLVD.
City-State-Zip:	PALM BEACH GARDENS FL 33418

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.

SIGNATURE: MALCOLM J SANDERS CLERK 01/07/2016

Electronic Signature of Signing Officer/Director Detail — Date