

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N27751

**Entity Name:** CHURCH OF THE TRINITY, METROPOLITAN COMMUNITY CHURCH, INC.

**FILED**  
**Mar 08, 2017**  
**Secretary of State**  
**CC2700514201**

**Current Principal Place of Business:**

7225 N LOCKWOOD RIDGE RD  
SARASOTA, FL 34243

**Current Mailing Address:**

7225 N LOCKWOOD RIDGE RD  
SARASOTA, FL 34243

**FEI Number: 65-0612811**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

TIGARD, CHARLES  
7225 N. LOCKWOOD RIDGE RD.  
SARASOTA, FL 34243 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title	PASTOR	Title	DIRECTOR OF ADMINISTRATION
Name	TIGARD, CHARLES	Name	BABYAK, LORI
Address	7225 N. LOCKWOOD RIDGE RD	Address	7225 N LOCKWOOD RIDGE RD
City-State-Zip:	SARASOTA FL 34243	City-State-Zip:	SARASOTA FL 34243

Title	DIRECTOR	Title	DIRECTOR
Name	GIRARD, FRANK	Name	STEWART, DAVID
Address	7225 N LOCKWOOD RIDGE RD	Address	7225 N LOCKWOOD RIDGE RD
City-State-Zip:	SARASOTA FL 34243	City-State-Zip:	SARASOTA FL 34243

Title	DIRECTOR	Title	DIRECTOR
Name	CROXFORD, DAVID	Name	ROBINSON, BETTY
Address	7225 N LOCKWOOD RIDGE RD	Address	7225 N LOCKWOOD RIDGE RD
City-State-Zip:	SARASOTA FL 34243	City-State-Zip:	SARASOTA FL 34243

Title	DIRECTOR	Title	DIRECTOR
Name	SEIBERT, MARY LEE	Name	MARKHAM, KEVIN
Address	7225 N LOCKWOOD RIDGE RD	Address	7225 N LOCKWOOD RIDGE RD
City-State-Zip:	SARASOTA FL 34243	City-State-Zip:	SARASOTA FL 34243

**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.*

**SIGNATURE: LORI BABYAK**

**DIRECTOR OF ADMIN.**

**03/08/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           RICE, MARY  
Address        7225 LOCKWOOD RIDGE RD.  
City-State-Zip: SARASOTA FL 34243