BCS/CD-2000 (0W08

MICHIGAN DEPARTMENT OF LABOR & ECONOMIC GROWTH NONPROFIT CORPORATION INFORMATION UPDATE



2008

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dentification N	umber	Corporation name			
8571	133 THE METROPOLITAN METHOD		THODIST CHURCH	NST CHURCH	
esident agent	name and m	ailing address of the registered of			
SHARON BLANKENSHIP 8000 WOODWARD AVENUE			RECEIVED	FILED	
DETROIT MI 48202		18202	\$ 2 0 AUG 0 8 2008	AUG 13 2008	
		16	Dept. of LEG	by Department Bureau of Gommercial Setvices	
he address of	the registere	ed office			
DETR	OIT MI 4	no changes from your previou	us filing check this box and proceed to item 6.	. If the resident agent and/or	
registered office has changed complete Items 1-6. If o Mailing address of registered office in Michigan (may be a P.O.				2. Resident Agent	
		d activities of the corporation durin	ox may not be designated as the address of the re	igistered office)	
				igistered office)	
Describe the	e purpose an	d activities of the corporation during NAME			
. Describe the		d activities of the corporation during NAME	ng the year covered by this report:		
. Describe the	e purpose an	d activities of the corporation during the co	ng the year covered by this report:		
Describe the	e purpose an	d activities of the corporation during NAME Required)	ng the year covered by this report:		
Describe the	President (i Secretary (i Treasurer (i	NAME Required) Required)	ng the year covered by this report:		
Describe the	President (f Secretary (f Vice Presid	NAME Required) Required)	ng the year covered by this report:		
Describe the	President (i Secretary (i Treasurer (i	NAME Required) Required)	ng the year covered by this report:		
Describe the	President (f Secretary (f Vice Presid	NAME Required) Required)	ng the year covered by this report:		
if different than President Officers	President (S Secretary () Treasurer (R Vice Presid Director (Re Director	NAME Required) Required) Required) Ctober 1, 2008.	BUSINESS OR RESIDE Please make your check or money order Return to: Michigan Department of Li	Payable to the State of Michigan.	
If different than President If different than Officers 6. Report Filing	President (For Secretary (For President Director (For Director Control of the Secretary (For Director (For Director (For Secretary (For Secre	NAME Required) Required) Required) Ctober 1, 2008.	Please make your check or money order Return to: Michigan Department of Li Bureau of Commercial Ser P.O. Box 30767 Lansing, MI 48909	payable to the State of Michigan.	