

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 1:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 700880 (8)

1. Corporation Name

**TRINITY UNITED METHODIST CHURCH OF BRADENTON, IN
C.**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/29/1960	3a. Date of Last Report 03/15/1994
4. FEI Number 59-0809622	Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ \$68.75 Supplemental Fee Not Required	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business 3200 MANATEE AVENUE WEST BRADENTON FL 34205	2a. Mailing Address 3200 MANATEE AVENUE WEST BRADENTON FL 34205
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Country
24. Zip	25. Country
29. Zip	30. Country

9. Name and Address of Current Registered Agent

Andrus, Paul F.
MILEY, SAMUEL W. JR.
C/O 3200 MANATEE AVE W
BRADENTON FL 34205

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when rechartering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	BADEN, EARL W. JR.	1.2 NAME	Bob Williams
STREET ADDRESS	1210 99TH ST NW.	1.3 STREET ADDRESS	1600 1st Ave West #505
CITY - ST - ZIP	BRADENTON FL	1.4 CITY - ST - ZIP	Bradenton, FL 34205
TITLE	S	2.1 TITLE	D
NAME	MOTT, BO	2.2 NAME	Chad Braniger
STREET ADDRESS	5113 15TH AVE., W.	2.3 STREET ADDRESS	3212 Riverview Blvd West
CITY - ST - ZIP	BRADENTON FL	2.4 CITY - ST - ZIP	Bradenton, FL 34205
TITLE	P	3.1 TITLE	D
NAME	COLEMAN, LARRY	3.2 NAME	Scott McClure
STREET ADDRESS	4230 RIVERVIEW BLVD.	3.3 STREET ADDRESS	1215 51st Street West
CITY - ST - ZIP	BRADENTON FL	3.4 CITY - ST - ZIP	Bradenton, FL 34209
TITLE	T	4.1 TITLE	T
NAME	MILEY, SAMUEL W. JR.	4.2 NAME	Paul F. Andrus
STREET ADDRESS	3200 MANATEE AVE. W.	4.3 STREET ADDRESS	c/o 3200 Manatee Ave. West
CITY - ST - ZIP	BRADENTON, FL 00000	4.4 CITY - ST - ZIP	Bradenton, FL 34205
TITLE	D	5.1 TITLE	D
NAME	STEWART, WILLIAM	5.2 NAME	Mary Lasseter
STREET ADDRESS	0000 RIVERVIEW	5.3 STREET ADDRESS	3702 1st Avenue West
CITY - ST - ZIP	BRADENTON FL	5.4 CITY - ST - ZIP	Bradenton, Florida 34205
TITLE	D	6.1 TITLE	D
NAME	JACKSON, SARAH	6.2 NAME	George Harrison
STREET ADDRESS	1615 78TH ST. CT. N.W.	6.3 STREET ADDRESS	4422 Riverview Blvd. West
CITY - ST - ZIP	BRADENTON FL	6.4 CITY - ST - ZIP	Bradenton, FL 34209

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Paul Andrus

Paul F. Andrus, Administrator

4/26/95

(813)747-3704

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #