SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $395)

NONPROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 28 AM 8:57

DOCUMENT # **715847** **(0)**

1. Corporation Name

TRINITY CHAPEL OF ST. AUGUSTINE, INC.

Principal Place of Business	Mailing Address
1485 U.S. #1 SOUTH ST AUGUSTINE FL 32086	1485 U.S. #1 SOUTH ST AUGUSTINE FL 32086

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/08/1969
3a. Date of Last Report: 08/22/1994
4. FEI Number: 59-1769026 ☐ 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 ☑ **FILING FEE IS $61.25**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

TINSLEY, DONAVAN E.
3977 SEA EAGLE CIRCLE
ST AUGUSTINE FL 32086

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 4528 MEADOW WOOD LANE
83
84 City: ELKTON FL 85 Zip Code: 32033

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		☑ Change ☐ Addition
TITLE	PD	11 TITLE		
NAME	TINSLEY, DONAVAN E. (REV	12 NAME		
STREET ADDRESS	3977 SEA EAGLE CIRCLE	13 STREET ADDRESS	4528 MEADOW WOOD LANE	
CITY-ST-ZIP	ST AUGUSTINE FL	14 CITY-ST-ZIP	ELKTON, FL 32033	
TITLE	T	21 TITLE		☐ Change ☐ Addition
NAME	PARKER, CHARLES A.	22 NAME		
STREET ADDRESS	261 ROLLING OAKS	23 STREET ADDRESS		
CITY-ST-ZIP	ST AUGUSTINE FL	24 CITY-ST-ZIP		
TITLE	DS	31 TITLE		☑ Change ☐ Addition
NAME	STRIPLING, JAMES G.	32 NAME		
STREET ADDRESS	1720 LIGHTSEY ROAD	33 STREET ADDRESS	235 LILY ROAD	
CITY-ST-ZIP	ST. AUGUSTINE FL	34 CITY-ST-ZIP		
TITLE	D	41 TITLE		☐ Change ☐ Addition
NAME	WARREN, PAUL	42 NAME		
STREET ADDRESS	5235 SILO ROAD	43 STREET ADDRESS		
CITY-ST-ZIP	ST AUGUSTINE FL	44 CITY-ST-ZIP		
TITLE	D	51 TITLE		☐ Change ☐ Addition
NAME	WELTER, GARY	52 NAME		
STREET ADDRESS	210 CYPRESS ROAD	53 STREET ADDRESS		
CITY-ST-ZIP	ST AUGUSTINE FL	54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

CR2E037 (3/95)

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 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James G Stripling JAMES G STRIPLING 6-22-95 (904) 824-6176
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0001220