

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724909

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** THE TRINITY ASSOCIATE REFORMED PRESBYTERIAN CHURCH, INCORPORATED, OF TAMPA, FLORIDA

**Current Principal Place of Business:**

14925 NORTH BOULEVARD  
TAMPA, FL 33613

**New Principal Place of Business:**

**Current Mailing Address:**

14925 NORTH BOULEVARD  
TAMPA, FL 33613

**New Mailing Address:**

**FEI Number:** 59-1218057      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SALONKO, DENNIS R  
16103 WEST LAKE BURRELL DRIVE  
LUTZ, FL 33549 US

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

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

**OFFICERS AND DIRECTORS:**

Title: SD  
Name: BURKS, SANDRA  
Address: 902 RAWLINGS CIRCLE  
City-St-Zip: LUTZ, FL 33549

Title: TD  
Name: SALONKO, DENNIS R  
Address: 16103 WEST LAKE BURRELL DRIVE  
City-St-Zip: LUTZ, FL 33549

Title: CCHD  
Name: CARROW, TOM  
Address: 18312 TOMLINSON DRIVE  
City-St-Zip: LUTZ, FL 33549

Title: VCHD  
Name: BOYER, MIKE  
Address: 28725 FALLING LEAVES WAY  
City-St-Zip: WESLEY CHAPEL, FL 33544

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: DENNIS R. SALONKO

TD

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date