2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 11, 2005 08:00 AM Secretary of State **DOCUMENT # 756082** 1. Entity Name TRINITY BAPTIST CHURCH OF MANATEE COUNTY, FLORIDA, INC. Principal Place of Business Mailing Address FLORIDA, INC. 5116 26TH STREET W. BRADENTON FL 34207 FLORIDA, INC. 5116 26TH STREET W. BRADENTON FL 34207 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 59-2077857 Not Applicable Zip Country Country **\$8,75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JARVIS, RONALD H Street Address (P O. Box Number is Not Acceptable) 5211 24TH AVE E PALMETTO FL 34221 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete Change ☐ Addition SWANSON, DANIEL A 2115 9TH AVE WEST UNIT 5B STREET ADDRESS STREET ADDRESS BRADENTON FL 34205 City-St-ZiP CITY-SI-ZIP HILLE Delete MILE Change Addition | JARVIS, RONALD H. NAME NAME 5211 24TH AVE., EAST STRLET ADDRESS STREET ADDRESS PALMETTO FL CITY SI-ZIP Cort-ST-ZIP THLE ☐ Delete ☐ Change ☐ Addition FELTS, JAMES H NAME 5613 16TH ST W STREET ADDRESS STREET ADDRESS BRADENTON FL 34207 CITY - ST - ZIP CHY-ST-ZIP Hitt Delete THUE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP TITLE Delete Uhif ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY ST- AP OUL ☐ Delete DICE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-7IP CITY ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 4-4-2005 (941) 751-9555 Ronald H. Jarvis

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: