2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 09, 2004 8:00 am DOCUMENT # N00000004653 **Secretary of State** 1. Entity Name 03-09-2004 90054 009 \*\*\*\*61.25 TRUE VINE TRANSFORMING MINISTRIES, INC. Principal Place of Business Mailing Address 12222 56TH TRUEVINE P.O. BOX 151869 TAMPA FL 33684-1869 TAMPA FL 33617 2. Principal Place of Business 3. Mailing Address 2224 Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State Applied For City & State 4. FEI Number 59-3554980 lampa Not Applicable Zip Country 7in Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Marcia HALL, MARCIA W 4747 W. WATERS AVE., #4402 Street Address (P.O. Box Number is Not Acceptable) # 1803 **TAMPA FL 33614** Zip Code 33614 1ampa 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, 2004 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE TITLE Delete Change ☐ Addition KNOCKETT, ANNIE NAME NAME 406 CHARLOTT AVE STREET ADDRESS STREET ADDRESS KINSTON NC 28501 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition BURVETTE, JULIE NAME NAME 756 FITZGERALD DR STREET ADDRESS STREET ADDRESS RALEIGH NC 27610 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition RATCLIFE, CLARENCE NAME NAME 2908 BUCKHORN CT STREET ADDRESS STREET ADDRESS RALEIGH NC 27610 CITY-ST-ZIP CITY-ST-ZIP Hall, Bruce 4949 Waters Ave#183 Change TITLE ☐ Delete TITLE ☐ Addition HALL, BRUCE NAME NAME 4747 WATERS AVE #4402 STREET ADDRESS STREET ADDRESS Tampa, FI 33614 Sutton, Decinical **TAMPA FL 33614** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition SUTTON, DEONICAL NAME NAME 205 BENSON St. 7946 HANLEY RD STREET ADDRESS STREET ADDRESS TAMPA FL 33615 VAlrico Fl 33594 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition EUBANKS, LINDA NAME NAME 12418 NORTH 15TH STREET #C STREET ADDRESS STREET ADDRESS **TAMPA FL 33612** CITY-ST-ZIP CITY-ST-ZIP 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

FILED

SIGNATURE: Marcia Hell MARCIA HAII 3/5/04 (813)243-9195

3/5/04

Affachment

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24/6)8592 -#NO0000004653.

Box 11

01 - D-

Alisa Sutton - Change 205 Benson St.

Valrico, FL 33594