

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 15, 2009
Secretary of State**

DOCUMENT# N06000009385

Entity Name: TRINITY CHURCH INTERNATIONAL - WEST, INC.

Current Principal Place of Business:

3460 FAIRLANE FARMS RD SUITE 3
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

3460 FAIRLANE FARMS RD SUITE 3
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 20-8194827 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSENBERGER, CYNTHIA
3460 FAIRLANE FARMS RD SUITE 3
WELLINGTON, FL 33414 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: D () Delete
Name: ROSENBERGER, BRYAN REV
Address: 3460 FAIRLANE FARMS RD SUITE 3
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: PETERS, TOM REV
Address: 7255 SOUTH MILITARY TRAIL
City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete
Name: BRIGGS, DAVID REV
Address: 7255 SOUTH MILITARY TRAIL
City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete
Name: PETERS, JAMIE REV
Address: 7255 SOUTH MILITARY TRAIL
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRYAN ROSENBERGER

D

04/15/2009

Electronic Signature of Signing Officer or Director

_____ Date