

FILE NOW: FILING FEE IS \$61.25

FILED

**Feb 23 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N18800 (5)
1. Corporation Name
TRINITY ASSEMBLY OF GOD OF MANATEE COUNTY, INC.



Principal Place of Business 3855 PRO AM AVE. E. BRADENTON FL 34203	Mailing Address PO BOX 20548 BRADENTON FL 34204
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3. Date Incorporated or Qualified 01/16/1987	
4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 Sulte, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29
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9. Name and Address of Current Registered Agent CARTER, DONALD R 3855 PRO AM AVE. E. BRADENTON FL 34203	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CARTER, DONALD		1.2 NAME	
STREET ADDRESS 3855 PRO AM AVE. E.		1.3 STREET ADDRESS	
CITY-ST-ZIP BRADENTON FL 34203		1.4 CITY-ST-ZIP	
TITLE TD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MENEELY, RICHARD		2.2 NAME	
STREET ADDRESS 3855 PRO AM AVE. E.		2.3 STREET ADDRESS	
CITY-ST-ZIP BRADENTON FL 34203		2.4 CITY-ST-ZIP	
TITLE SD	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME KELLE, RANDY		3.2 NAME Willie Braswell	
STREET ADDRESS 3855 PRO AM AVE. E.		3.3 STREET ADDRESS 604 Fontana Lane	
CITY-ST-ZIP BRADENTON FL 34203		3.4 CITY-ST-ZIP Bradenton, FL 34209-1822	
TITLE D	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME AUMEND, HARRY		4.2 NAME	
STREET ADDRESS 3855 PRO AM AVE. E.		4.3 STREET ADDRESS	
CITY-ST-ZIP BRADENTON FL 34203		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME Bob Eldridge	
STREET ADDRESS		5.3 STREET ADDRESS 921 Faith Circle E, #39	
CITY-ST-ZIP		5.4 CITY-ST-ZIP Bradenton, FL 34202-3017	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: _____ 2/14/98 941751-4773

CR2E037 (10/97)