

FILE NOW: FILING FEE IS \$61.25

FILED
May 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name
N46635
Trinity Evangelical Seminary of Florida

Principal Place of Business Mailing Address
10069 Boca Circle (New)
Naples, FL 34109

3. Date incorporated or Qualified
Dec. 1991

4. FEI Number
650309698

Applied For
Not Applicable

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

Jerry W. Forrester
10069 Boca Circle
Naples, FL 34109

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

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

TITLE	<i>D</i>	<input checked="" type="checkbox"/> DELETE
NAME	<i>R.J. Cooper</i>	
STREET ADDRESS	<i>808 Lake Elbert Court N.E.</i>	
CITY-ST-ZIP	<i>Winter Haven, FL 33881</i>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<i>President - T</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<i>Jerry W. Forrester</i>	
1.3 STREET ADDRESS	<i>10069 Boca Circle</i>	
1.4 CITY-ST-ZIP	<i>Naples, FL 34109</i>	
2.1 TITLE	<i>T</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<i>Larry Ward</i>	
2.3 STREET ADDRESS	<i>3440 19th Ave. S.W.</i>	
2.4 CITY-ST-ZIP	<i>Naples, FL 33964</i>	
3.1 TITLE	<i>T</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	<i>Bruce Williams</i>	
3.3 STREET ADDRESS	<i>3909 South MacDill Ave.</i>	
3.4 CITY-ST-ZIP	<i>Tampa, FL 33611</i>	
4.1 TITLE	<i>T</i>	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	<i>J.D. Middlebrook</i>	
4.3 STREET ADDRESS	<i>6366 Daybreak Dr.</i>	
4.4 CITY-ST-ZIP	<i>Bartlett, TN 38135</i>	
5.1 TITLE	<i>T</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	<i>Grace Forrester</i>	
5.3 STREET ADDRESS	<i>10069 Boca Circle</i>	
5.4 CITY-ST-ZIP	<i>Naples, FL 34109</i>	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	600002533196	
6.3 STREET ADDRESS	<i>-05/22/98--01050--004</i>	
6.4 CITY-ST-ZIP	***61.25	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: *Jerry W. Forrester* **Jerry W. Forrester** *5-4-98 (800) 358-8373*

Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #

CR2E037 (10/97)