


**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90503 019 ****61.25

DOCUMENT # N95000002561

1. Entity Name
TRINITY Pentecostal Deliverance Church



DO NOT WRITE IN THIS SPACE

20054082

2. Principal Place of Business
3788 S.W. 40th St
Suite, Apt. #, etc.

3. Mailing Address
3788 S.W. 40th St
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
West Park FL

City & State

Zip
33023

Country
BROWARD

Zip
33023

Country

4. FEI Number
11-2653554

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Alice Monroe

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

3788 S.W. 40th St

City
West Park FL Zip Code
33023

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FEE IS \$61.25
Initial or Amended UBR

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

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Rita Coke</u> <u>Treasurer</u> <u>6861 S.W. 55th</u> <u>Pembroke Pine FL 33025</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Setnia Tomelison</u> <u>Chairperson</u> <u>745 N.W. 176 Terrace</u> <u>FL 33169</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Secretary</u> <u>Jacynth Wallace</u> <u>3788 S.W. 40th St</u> <u>West Park FL 33023</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>Alice Monroe</u> <u>3788 S.W. 40th St</u> <u>West Park 33023</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E037B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Alice Monroe 4/25/05