


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # 701286
 1. Entity Name
TRINITY COMMUNITY CHURCH OF DEERFIELD BEACH, INC.



Principal Place of Business Mailing Address
841 S.E. 2 COURT **841 S.E. 2 COURT**
DEERFIELD BEACH, FL 33441 **DEERFIELD BEACH, FL 33441**

DO NOT WRITE IN THIS SPACE



01092008 No Chg-NP CRZE037 (11/05)

4. FEI Number Applied For
59-1432847 Not Applicable

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

6. Name and Address of Current Registered Agent
CREELMAN, GERDA
750 SE 6TH AVE, #320
DEERFIELD BEACH, FL 33441

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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: Gerda Creelman DATE: 4/9/2006
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2006

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAVIDSON, ROBERT 4945 BISMARCK PLAM DRIVE BOYNTON BEACH, FL 33436
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GENARO, LOIS 810 SE 7TH ST DEERFIELD BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD DORVICK, MERRIBETH 708 SE 4TH STREET DEERFIELD BEACH, FL 33441
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WEST, MARIA 335 SW 34 AVE DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ULLRICH, REBECCA 326 SW 34 AVE DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000505575
 04/26/06-80120-004 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lois Genaro **Lois Genaro, Treasurer** 04/09/06 (954)421-4525
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #