2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007
Secretary of State

DOCUMENT# 701261

Entity Name: TRINITY CHURCH, INCORPORATED

Current Principal Place of Business:

17801 NW 2ND AVENUE
NORTH MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

PO BOX 680820
MIAMI, FL 33168

New Mailing Address:

FEI Number: 59-1201093 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WILKERSON, RICHARD P
220 GOLDEN BEACH DR
MIAMI, FL 33168 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:	AKINBIYI, SUNDAY	
Address:	18542 NW 23RD COURT	
City-St-Zip:	MIAMI, FL 33156	
Title:	D	( ) Delete
Name:	BRILLIANT, PAUL	
Address:	17801 NW 2ND AVENUE	
City-St-Zip:	MIAMI, FL 33169	
Title:	D	( ) Delete
Name:	SAJOUS, PRINCE	
Address:	7800 NW 15 AVE.	
City-St-Zip:	MIAMI, FL 33147	
Title:	D	( ) Delete
Name:	HUGHES, TOM	
Address:	17140 NW 12TH AVE	
City-St-Zip:	MIAMI, FL 33169	
Title:	D	( ) Delete
Name:	SUTHARD, JAMES,	
Address:	505 NW 122ND ST.	
City-St-Zip:	N. MIAMI, FL	
Title:	D	( ) Delete
Name:	WILKERSON, RICHARD	
Address:	220 GOLDEN BEACH DRIVE	
City-St-Zip:	MIAMI, FL 33160	

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:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D/O	(X) Change ( ) Addition
Name:	WILKERSON, RICHARD	
Address:	220 GOLDEN BEACH DRIVE	
City-St-Zip:	MIAMI, FL 33160	

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: RICHWARD WILKERSON D/O 04/25/2007

Electronic Signature of Signing Officer or Director — Date