

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000006322

**Entity Name:** TRINITY SPECIAL SPORTSMAN MINISTRIES, INC.

**Current Principal Place of Business:**

723 RUSSELL DR  
PLANT CITY, FL 33563

**Current Mailing Address:**

723 RUSSELL DR  
PLANT CITY, FL 33563

**FEI Number:** 30-0325515

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PAWLOWSKI, DENNIS  
723 RUSSELL DR  
PLANT CITY, FL 33563 US

*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

**Officer/Director Detail :**

Title P  
Name PAWLOWSKI, DENNIS  
Address 723 RUSSELL DR  
City-State-Zip: PLANT CITY FL 33563

Title D  
Name HARDEE, CASEY  
Address 701 W PINEDALE DR.  
City-State-Zip: PLANT CITY FL 33563

Title D  
Name ADAMS, BOB  
Address 3512 REGNER DR.  
City-State-Zip: PLANT CITY FL 33565

Title D  
Name BENDER, BILL  
Address 503 N PALMER ST  
City-State-Zip: PLANT CITY FL 33563

Title D  
Name MOORE, CHRIS  
Address 107 ARLINGTON AVE E  
City-State-Zip: OLDSMAR FL 34677

*I hereby 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 all other like empowered.*

**SIGNATURE:** DENNIS PAWLOWSKI

**PRESIDENT**

**04/16/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date