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: LINDFORD DELON HAYES SR.

Electronic Signature of Signing Officer/Director Detail

Title Nar Add City-State-Zip: HOPKINSVILLE KY 42240

	Electronic Signature of Registered Agent				
Officer/Director Detail :					
Title	D	Title	S		
Name	HAYES, LINDFORD DSR	Name	PEAKE, DIANN		
Address	4390 NE 138TH PLACE	Address	742 SEWARD AVENUE		
City-State-Zip:	ANTHONY FL 32617	City-State-Zip:	AKRON OH 44320		
Title	т				
Name	WHALEY-JACOBS, SHATRELL				
Address	2915 COX MILL ROAD, APT. L2				

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:

4390 NE 138TH PLACE ANTHONY, FL 32617

Current Mailing Address:

FEI Number: 80-0613993

Name and Address of Current Registered Agent:

HAYES, LINDFORD DSR 4390 NE 138TH PLACE ANTHONY, FL 32617 US

Current Principal Place of Business: 4390 NE 138TH PLACE

ANTHONY, FL 32617

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N1000005987

Entity Name: TRINITY INTERNATIONAL TEACHING MINISTRIES, INC.

May 12, 2013 Secretary of State CC3502206911

FILED

Certificate of Status Desired: Yes

Date

Date

PRESIDENT/FOUNDER

05/12/2013