## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 701742** 

**FILED** May 01, 2007 Secretary of State

Entity Name: TRINITY UNITED METHODIST CHURCH, INCORPORATED, OF PLANT CITY, FLORIDA

**Current Principal Place of Business:** New Principal Place of Business:

402 W. ENGLISH ST 402 W. ENGLISH ST.

PLANT CITY, FL 33564 US PLANT CITY, FL 33563 US

**Current Mailing Address: New Mailing Address:** 

402 W. ENGLISH ST. P.O. BOX 554

P.O. BOX 554 PLANT CITY, FL 33564 US

PLANT CITY, FL 33564

FEI Number: 59-2349060 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

US

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

WRIGHT, CAROLE WRIGHT, CAROLE 1104 E BARKER ST 1104 E BAKER ST

PLANT CITY, FL 33563 PLANT CITY, FL 33563 US 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: 05/01/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

BARDEN, BARBARA BOTHA, SAREL Name: Name: 702 N WHEDER ST Address: 5250 MIRIAM DRIVE Address: City-St-Zip: PLANT CITY, FL 33566 City-St-Zip: LAKELAND, FL 33813

Title: () Delete Title: (X) Change ( ) Addition

MATTHEWS, CHRIS Name: CLARK, SAM Name:

Address: 3712 YOUNG RD Address: 1903 N GOLFVIEW DRIVE City-St-Zip: PLANT CITY, FL 33565 City-St-Zip: PLANT CITY, FL 33566

Title: () Delete Title: (X) Change ( ) Addition

BOTHA, SAREL BARNY, MARY LU Name: Name: 695 N EDGEWATER DRIVE Address: 5250 MIVILN DR Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: PLANT CITY, FL 33565

Title: () Delete Title: (X) Change ( ) Addition

Name: SHIFFLETT, RON Name: SHIFFLETT, RON 516 N CHESNUT RD Address: Address: 516 N CHESNUT RD City-St-Zip: LAKELAND, FL 33815 City-St-Zip: LAKELAND, FL 33815

Title: () Delete Title: (X) Change ( ) Addition

MACISCO, JOAN KENT, LAMAR Name: Name: 308 S EDGEWATER ST 603 N WILLS STREET Address: Address: City-St-Zip: PLANT CITY, FL 33565 City-St-Zip: PLANT CITY, FL 33563

Title: (X) Delete Title: () Change () Addition

ROGERS, RON Name: Name: Address: 2715 KALA LANE Address: PLANT CITY, FL 33563 City-St-Zip: City-St-Zip:

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: SAREL BOTHA Ρ 05/01/2007