FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 703325

1. Corporation Name

APOPKA FL 32703

TRINITY BAPTIST CHURCH OF APOPKA, INC.

Principal Place of Business

1022 SOUTH ORANGE BLOSSOM TRAIL

Mailing Address

1022 SOUTH ORANGE BLOSSOM TRAIL APOPKA FL 32703

FILED Apr 05, 1999 8:00 am § Secretary of State

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2. Principal Pl	ace of Business 2a. Mailing Address			3. Date Incorporated or Qualifed				
1		26			12/14/1961			
Suite, Apt. #, etc. Suite, Apt. #, etc.					4. FEI Number		lied For	
2 -		27			59-1560421		Applicable	
City & State	ity & State City & State			5. Certifcate of Status Desired		S8.75 Additional Fee Required		
Zip	Country	Zip	Country		6. Election Campaign Financing	\$5.00 1	Лау Ве	
4 25 29 30					Trust Fund Contribution	Added to	Fees	
	9. Name and Address of Current	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	-, -		10. Name and Address of New Register	d Agent		
			81	Name				
BEALE, LE ROY				Ct	(D.O. Boy Number is Not Acceptable)			
1302 LAVANHAM CT APOPKA FL 32712				82 Street Address (P.O. Box Number is Not Acceptable) 83				
			84	City	F	85 Zip C	ode	
44		and C17 1EDD Florida Ctatuta	the above	named com	poration submits this statement for the purpose		egistered	
office or n	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation.	of Florida. Such change was aut	norized by i	tne corporation	on's board of directors. I hereby accept the ap	pointment as reg	istered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: F	Penistered Anen	t signature require	od when reinstating) DATE	-		
12.	OFFICERS AND		13.	r signatoro rodono	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12	
TITLE	D	DELETE	1.1 TITLE	Ţ <u>-</u>		☐ Change	☐ Addition	
	BUCKER, ED		1.2 NAME					
NAME	2381 CAYMAN CIR		1.3 STREET	ADDRESS				
STREET ADDRESS				1				
CITY-ST-ZIP	ZELLWOOD FL 32798	□ DELETE	1.4 CITY-ST 2.1 TITLE	I-ZIP		☐ Change	Addition	
TITLE	S	☐ BELETE	1					
NAME	PEACOCK, TOM		2.2 NAME					
STREET ADDRESS	2003 KILMER LANE		2.3 STREET	ADDRESS				
CITY-ST-ZIP	APOPKA FL 32703		2. 4 CITY-S	T-ZIP		☐ Change	Addition	
TITLE	D	☐ DELETE	3.1 TITLE			□ cuange	Addition	
NAME	DONALD F LAYTON		3.2 NAME					
STREET ADDRESS	125 LUDLOW DRIVE		3.3 STREET	ADDRESS				
CITY-ST-ZIP				I .				
TITLE	LONGWOOD FL		3.4. CITY-S	T-ZIP				
	D LONGWOOD FL	☐ DELETE	3.4. CITY-S 4.1 TITLE	-	- No Mari	Change	Addition	
NAME		☐ DELETE		-	UNTING, PALL	Change	Addition	
NAME STREET ADDRESS	D	☐ DELETE	4.1 TITLE	-	ONTING, PALL 728 Country Terrace Lave	Change	Addition	
STREET ADDRESS	D Bunting, Paul 2011 Lake Alden Dr.	☐ DELETE	4.1 TITLE 4.2 NAME	-	ONTING, PAUL 728 Country Terrace Lave popka, FI 32703	☑ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	D BUNTING, PAUL	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET	-	ONTING, PAUL 728 Country Terrace Lave popka, FI 32703	☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE	D BUNTING, PAUL 2011 LAKE ALDEN DR APOPKA FL 32712 P		4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-ST	-	ONTING, PAUL 728 Country Terrace Lave popka, FI 32703			
STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BUNTING, PAUL 2011 LAKE ALDEN DR APOPKA FL 32712 P BEALE, LE ROY		4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-ST 5.1 TITLE	ADDRESS A	ONTING, PAUL 728 Country Terrace Lave popka, FI 32703			
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BUNTING, PAUL 2011 LAKE ALDEN DR. APOPKA FL 32712 P BEALE, LE ROY 1302 LAVANHAM CT APOPKA FL 32712	☐ DELETE	4.1 TITLE 4. 2 NAME 4.3 STREET 4.4 CITY-ST 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-ST 6.1 TITLE 6.2 NAME	ADDRESS I ADDRESS I ADDRESS I - ZIP	OUNTING, PALL 728 Country Terrace Lave popka, FI 32703	. Change		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D BUNTING, PAUL 2011 LAKE ALDEN DR. APOPKA FL 32712 P BEALE, LE ROY 1302 LAVANHAM CT APOPKA FL 32712	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-ST 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-ST 6.1 TITLE	ADDRESS TADDRESS TADDRESS	OUNTING, PALL 728 Country Terrace Lave popka, FI 32703	. Change	☐ Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes: I turner certify that the information indicated on this annual report or supplemental annual report is to early 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SHATURE AND TYPED ON PRINTED HAVE OF SKOWING OFFICER OR DIRECTOR

3/31/99 407-886-2964 Date Daytime Phone # CR2E037 (11/98)