

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703737

FILED  
Feb 22, 2010  
Secretary of State

**Entity Name:** TRINITY RESCUE MISSION, INC.

**Current Principal Place of Business:**

622 UNION STREET  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

800 HAMMOND BLVD  
JACKSONVILLE, FL 32221

**New Mailing Address:**

**FEI Number:** 59-6152373

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MESSER, THOMAS C.  
8974 MOSEY ALONG COURT  
JACKSONVILLE, FL 32221 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: PD  
Name: MESSER, THOMAS C.  
Address: 8974 MOSEY ALONG COURT  
City-St-Zip: JACKSONVILLE, FL 32221

Title: VD  
Name: COOKE, GARY  
Address: 1638 WHITE OWL ROAD  
City-St-Zip: ORANGE PARK, FL 32003

Title: SD  
Name: LEVER, CHAUNCEY  
Address: 1302 LAKEWOOD ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: TD  
Name: AKINS, MICHAEL  
Address: 8374 GRAMPELL DRIVE  
City-St-Zip: JACKSONVILLE, FL 32221

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: THOMAS C. MESSER

PD

02/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date