

703737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

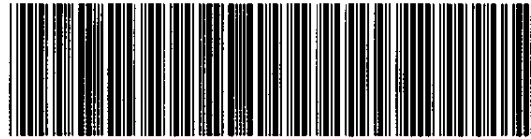
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Change
Lewis

6-22-10

LAW OFFICES
BLACKBURN & COMPANY, L.C.

5150 BELFORT ROAD, SOUTH
BUILDING 500
JACKSONVILLE, FLORIDA 32256

DENNIS L. BLACKBURN
dlb@blackburnco.org

ROBERT L. JONES III
rjones@blackburnco.org

TELEPHONE: 904-296-7713

FACSIMILE: 904-296-7716

FACSIMILE: 904-493-0384

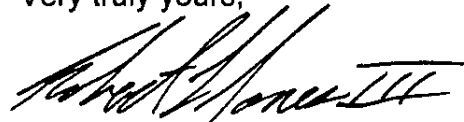
June 16, 2010

Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Dear Sir/Madam:

Enclosed for filing are Statement of Change of Registered Agent forms for The Trinity Baptist Church of Jacksonville, Inc., Trinity Baptist College, Inc. and Trinity Rescue Mission, Inc. Also enclosed is our check in the amount of \$105.00 for the filing fee. If you have any questions concerning this filing, please contact me.

Very truly yours,



Robert L. Jones III

RLJ:rd
Enclosures

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Trinity Rescue Mission, Inc.
2. The principal office address: 622 Union Street, Jacksonville, Florida 32202
3. The mailing address (if different): 800 Hammond Blvd., Jacksonville, Florida 32221
4. Date of incorporation/qualification: 03/16/1962 Document number: 703737
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Thomas C. Messer
8974 Mosey Along Court
Jacksonville, Florida 32221

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Robert L. Jones III
5150 Belfort Rd. S., Bldg. 500
P.O. Box NOT acceptable
Jacksonville, Florida 32256

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TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Thomas C. Messer
Signature of an officer or director

Thomas C. Messer
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Robert L. Jones III
Signature of Registered Agent

6/16/10
Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)