

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704763

FILED
Apr 29, 2009
Secretary of State

Entity Name: TRINITY CHURCH INTERNATIONAL, INC.

Current Principal Place of Business:

7255 S MILITARY TRAIL
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

7255 S MILITARY TRAIL
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 23-7256642

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOMMY C. PETERS
7255 S MILITARY TRAIL
LAKE WORTH, FL 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: DTS () Delete
Name: WEST, DAN
Address: 1571 LIVE OAK DRIVE
City-St-Zip: W PALM BEACH, FL 00000,

Title: PD () Delete
Name: PETERS TOMMY C
Address: 4117 ALPINIA CT., N
City-St-Zip: BOYNTON BEACH, FL 33436

Title: DV () Delete
Name: CHAPPELL, TOM
Address: 8884 SPRING VALLEY DR., S
City-St-Zip: BOYNTON BEACH, FL 33437

Title: DV () Delete
Name: BRIGGS, DAVID
Address: 1835 CARANDIS RD
City-St-Zip: WEST PALM BCH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: TOM CHAPPELL

DV

04/29/2009

Electronic Signature of Signing Officer or Director

Date