## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 705618**

FILED Jan 25, 2005 Secretary of State

Entity Nai	me: TRINITY	UNITED METHODIST CHURC	CH OF PALM BEACH GARDEN	S, INC.	
Current Principal Place of Business:			New Principal Place of Business:		
	ILITARY TRAI ACH GARDEN	L NS, FL 334105498 US			
Current Mailing Address:			New Mailing Address:		
	ILITARY TRAI ACH GARDEN	L NS, FL 334105498 US			
FEI Number:	: 59-1148356	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
STE. A	LITARY TRAIL	- NS, FL 33410 US			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	OLSEN, SAEN 1044 SIENNA	) Delete I OAKES CIRCLE S. GARDENS, FL 33410 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WATTS, ARTH	QUAY STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ELMORE, KEN 8533 154TH R		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SAEN OLSEN PD 01/25/2005