## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#715955** 

FILED Apr 26, 2007 Secretary of State

Entity Name: TRINITY BAPTIST CHURCH OF SILVER LAKE DRIVE, INC.

Current Principal Place of Business: New Principal Place of Business:

5021 SILVER LAKE DRIVE PALATKA, FL 32177

Current Mailing Address: New Mailing Address:

5021 SILVER LAKE DRIVE PALATKA, FL 32177

FEI Number: 59-6543631 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JOHNSON, MARVIN 318 HEIDT ROAD PALATKA, FL 32177 US

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:

Clastrania Circathura of Danistana d Anant

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 TD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 JOHNSON, MARVIN,
 Name:
 COBURN, CHARLES M

 Address:
 318 HEIDT ROAD
 Address:
 5021 SILVER LAKE DRIVE

 City-St-Zip:
 PALATKA, FL 32177
 City-St-Zip:
 PALATKA, FL 32177

Title: Title: (X) Change ( ) Addition ( ) Delete Name: BELLAMY, JAMES E Name: JOHNSON, MARVIN Address: 218 ST WELL AVE Address: 318 HEIDT ROAD City-St-Zip: PALATKA, FL 32177 City-St-Zip: PALATKA, FL 32177

Title: TD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WILLIAMS, JEFFREY A
 Name:

 Address:
 110 STOCK AVE
 Address:

 City-St-Zip:
 INTERLACHEN, FL 32148
 City-St-Zip:

 $\label{eq:title:definition} {\sf Title:} \qquad {\sf D} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf TD} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

Name: CANNON, MELBA H

Address: 1349 SOUTH STATE ROAD 19 Address: 1349 SOUTH STATE ROAD 19

City-St-Zip: PALATKA, FL 32177 City-St-Zip: PALATKA, FL 32177

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: MELBA H. CANNON TREA 04/26/2007