2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2009
Secretary of State

DOCUMENT# 720267

Entity Name: TRINITY UNITED METHODIST CHURCH OF GAINESVILLE, FLORIDA, INC.

Current Principal Place of Business:

4000 NW 53RD AVE
GAINESVILLE, FL 32653

New Principal Place of Business:

Current Mailing Address:

4000 NW 53RD AVE
GAINESVILLE, FL 32653

New Mailing Address:

FEI Number: 59-1113259 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JOHNSON, DAN G
4000 NW 53RD AVE
GAINESVILLE, FL 32653 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 ( ) Delete
Name: BUHI, BILL
Address: 4000 NW 53RD AVE
City-St-Zip: GAINESVILLE, FL 32653

Title: VD ( ) Delete
Name: TENNANT, SUE
Address: 4000 NW 53RD AVE
City-St-Zip: GAINESVILLE, FL 32653

Title: AMT ( ) Delete
Name: RICHARDSON, LAURA
Address: 4000 NW 53RD AVE
City-St-Zip: GAINESVILLE, FL 32653

Title: S ( ) Delete
Name: SCROGGIE, ANN
Address: 4000 NW 53 AVE
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: YONUTAS, DAVID
Address: 4000 NW 53RD AVE
City-St-Zip: GAINESVILLE, FL 32653

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

Title: S (X) Change ( ) Addition
Name: KILMER, RICHARD
Address: 4000 NW 53 AVE
City-St-Zip: GAINESVILLE, FL 32653

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: LAURA RICHARDSON AMT 01/30/2009

Electronic Signature of Signing Officer or Director — Date