## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Apr 23, 2007 08:00 All Secretary of State **DOCUMENT #723971** 1. Entity Name TRINITY CHRISTIAN CENTER, INC. Principal Place of Business Mailing Address 4416 E.S.R. 540A 4416 E.S.R. 540A LAKELAND, FL 33813 LAKELAND, FL 33813 03212007 No Chg-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1700889 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HULZEBOS, PHILIP K. DO NOT WRITE 4338 DAVID CRUM LANE LAKELAND, FL 33813 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due by May 1, 2007 10, OFFICERS AND DIRECTORS TD TITLE NAME ROWLAND, ALLAN STREET ADDRESS 5909 WINDWOOD DR CITY-ST-ZIP LAKELAND, FL 33813 000000725241 05/03/07-80014-012 70.00 NAME HULZEBOS, PHILIP K. STREET ADDRESS 4338 DAVID CRUM LANE CITY-ST-ZIP LAKELAND, FL 33813 NAME STEVERSON, JIM STREET ADDRESS 1604 STERLING DRIVE DO NOT WRITE CITY-ST-ZIP LAKELAND, FL 33813 TIRE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TIPED ON PRINTED NAME OF SIGNING OF IGENERAL SIRECTO

4/18/07

863-646-2860

**FILED** 

Daytime Phone #