2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 724461 Jan 13, 2000 8:00 am 1. Entity Name **Secretary of State** TRINITY BAPTIST CHURCH OF PALM BEACH COUNTY, INC 01-13-2000 90028 043 ****61.25 Mailing Address Principal Place of Business 3097 HIBISCUS CIRCLE 3097 HIBISCUS CIRCLE WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409-2720 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 23-7290971 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) FIX. HARRY R. 3070 HIBISCUS CIRCLE WEST PALM BEACH FL 33409 Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Addition ☐ Delete TITLE NAME NAME MARTIN, AARON R STREET ADDRESS STREET ADDRESS 70 NEVA DR CITY-ST-7IP CITY-ST-ZIP W PALM BEACH FL Change ☐ Addition VD. □ Delete TITLE NAME FIX. HARRY R. JR. NAME STREET ADDRESS STREET ADDRESS 3051 HIBISCUS CIRCLE CITY-ST-ZIP CITY-ST-ZIP w Pálm Be<u>ach Fl</u> ☐ Change ☐ Addition TITLE Delete TITLE NAME WALKER, JOYCE M NAME STREET ADDRESS STREET ADDRESS 4450 POTOMAC AVE W PALK BEACH, FL-3345 CITY-ST-ZIP CITY-ST-ZIP W PALM BCH, FL 00000 Change: TITLE ☐ Delete TITI F Addition DEEN, EDITH F NAME NAME STREET ADDRESS STREET ADDRESS 1298 DREXEL RD CITY-ST-ZIP CITY-ST-ZIP w Palm Beach Fl ☐ Delete Change ☐ Addition TITLE TITLE Walker, Roy E NAME NAME STREET ADDRESS STREET ADDRESS 4450 POTOMAC AVE CITY-ST-ZIP CITY-ST-ZIP W PALM BCH, FL 00000 Addition PD □ Delete TITLE TITLE NAME FIX, HARRY R NAME STREET ADDRESS STREET ADDRESS 3070 HIBISCUS CIR CITY-ST-ZIP CITY-ST-ZIP W PALM BCH, FL 00000 I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like engrowered.

Daytime Phone #