

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **738372** (2)

1. Corporation Name

TRINITY UNITED PRESBYTERIAN CHURCH, ST. PETERSBURG, FLORIDA, INC.



Principal Place of Business

Mailing Address

**2830-22ND AVE. S.
ST. PETERSBURG FL 33712**

**2830-22ND AVE. S.
ST. PETERSBURG FL 33712**

3. Date Incorporated or Qualified
03/16/1977

3a. Date of Last Report
06/12/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2549045

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CUMMINGS, JOSEPH D
3508 28TH AVE S
ST. PETERSBURG FL 33711**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: **JOSEPH D. CUMMINGS**

TRUSTEE

4/3/96

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when nonstatutory)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE
NAME **CUMMINGS, JOSEPH**
STREET ADDRESS **3508 28TH AVE S**
CITY - ST - ZIP **ST. PETERSBURG FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **V** ☐ DELETE
NAME **BROWN, MISHILL**
STREET ADDRESS **1919 14TH AVENUE SOUTH**
CITY - ST - ZIP **ST. PETERSBURG FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE **D** ☐ DELETE
NAME **FERGUSON, RALPH**
STREET ADDRESS **421 38TH STREET SOUTH**
CITY - ST - ZIP **ST. PETERSBURG, FL 0**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE **S** ☐ DELETE
NAME **ELOISE THOMPSON**
STREET ADDRESS **2651 MIRANDA WAY SO.**
CITY - ST - ZIP **ST. PETERSBURG FL 33712**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE **T** ☐ DELETE
NAME **POWERS, CHRISTINE**
STREET ADDRESS **3925 41ST STREET SOUTH**
CITY - ST - ZIP **ST. PETERSBURG FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE **D** ☐ DELETE
NAME **CRENSHAW, CHERYL**
STREET ADDRESS **331 55TH AVENUE SOUTH**
CITY - ST - ZIP **ST. PETERSBURG FL**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Joseph D. Cummings
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

28 March 1996 (813) 867-3900
Date Daytime Phone #

CR2E037 (12/95)