## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

## **DOCUMENT # 738372**

1. Entity Name

## TRINITY LINITED PRESBYTERIAN CHURCH, ST. PETERSBU



**FILED** Mar 31, 2003 8:00 am Secretary of State

03-31-2003 90171 042 \*\*\*\*61.25

RG, FLORIDA, INC.								
Principal Plac	ce of Business	Mailing Address	<u> </u>	1				
2830-22ND AVES. ST. PETERSBURG FL 33712		2830-22ND AVES. ST. PETERSBURG FL 33712						
2 Principal F	Place of Rusiness	3. Mailing Address	·					
2. Principal Place of Business		G. Mizining Addition		! ISBNI 18600 ING   ING			ii <b>019</b> 31 1001	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State		4. FEI Number 59-25	49045		oplied For ot Applicable	
Zip	Country	Zip	Country	5. Certificate of Status I		8.75 Add		
	6. Name and Address of Current		7. Name and Address of New Registered Agent					
The second secon			Name					
CUMMIN	GS, JOSEPH D			(P.O. Box Number is Not Ad				
	TH AVE S							
ST. PETE	ersbûrg fl 33711							
			City		FL	Zip Code	е	
8. The above	e named entity submits this statement fo	or the purpose of changing its regi	I stered office or registe	red agent, or both, in the S	tate of Florida. I am fa	<u> </u>	and accept	
the obliga	tions of registered agent.			^			1	
·	Joseph Llunin	10,000		(1/2)	ast. a.B 25	7 200	2	
SIGNATURE	Signature, typed or printed name of registered agent	<del></del>	istered Agent signature require	d when reinstating)	muary 27	J L DO	9	
12 (2744	1			Ų į				
		9. Election Campaig	an Financina	es 00	Make Check	Pavahle	to	
§ FILE NOW: FEE IS \$61.25  Trust Fund Contributi			· · · —	\$5.00 May Be Added to Fees	Florida Departr			
	*							
10.	OFFICERS AND DIE		i	ADDITIONS/CHANGES TO		_		
TITLE NAME	CUMMINGS, JOSEPH	50.00	TITLE NAME			Change	Addition \	
STREET ADDRESS	3598 28TH AVE S		STREET ADDRESS					
CITY-ST-ZIP	ST. PETERSBURG FL		CITY-ST-ZIP				1	
TITLE	V	☐ Delete	TITLE			Change	Addition	
NAME	BROWN, MISHELL		NAME			c.range		
STREET ADDRESS	1919 14TH AVENUE SOUTH		STREET ADDRESS					
CITY-ST-ZIP	ST. PETERSBURG FL		01D/ 07 31D					
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12. 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 empowered.

CITY-ST-ZIP

ST. PETERSBURG FL

January 27,2023