

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738711

FILED
Mar 30, 2006
Secretary of State

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

Current Principal Place of Business:

4150 S. SHADE AVE.
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

4150 S. SHADE AVE.
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 59-0906732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILNER, JERRY F REV
4150 SOUTH SHADE AVENUE
SARASOTA, FL 34231 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: CD () Delete
Name: FILLMORE, ERMA
Address: 8691 WOODBRIAR DR
City-St-Zip: SARASOTA, FL

Title: D () Delete
Name: LANDIS, BRUCE
Address: 2232 PINE TERRACE
City-St-Zip: SARASOTA, FL 34231

Title: SD () Delete
Name: SMITH, BARBARA
Address: 5149 BOCA RATON AVENUE
City-St-Zip: SARASOTA, FL 34234

Title: D () Delete
Name: RAYMOND, MARY
Address: 2823 COVENTRY WAY
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: BECK, KEN
Address: 4940 WINDFLOWER CIRCLE
City-St-Zip: SARASOTA, FL 34241

Title: D () Delete
Name: MCGUIRT, KAREN
Address: 3961 CHAUCER PLACE
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: FILLMORE, ERMA
Address: 8691 WOODBRIAR DR
City-St-Zip: SARASOTA, FL 34238

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

Title: SD (X) Change () Addition
Name: MCGUIRT, KAREN
Address: 1810 ROBIN HOOD STREET
City-St-Zip: SARASOTA, FL 34231

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

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

Title: D (X) Change () Addition
Name: SPRENGER, FRITZ
Address: 1917 RAIN FOREST TRAIL
City-St-Zip: SARASOTA, FL 34240

I hereby certify that the information supplied with this filing does not qualify for the 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: ERMA FILLMORE

CD

03/30/2006

Electronic Signature of Signing Officer or Director

Date