

FILE NOW: FILING FEE IS \$61.25

FILED

May 14 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 739934 (8)

1. Corporation Name

TRINITY CHAPEL OF SARASOTA, INC.



Principal Place of Business

Mailing Address

**3939 WEBBER STREET
SARASOTA FL 34232
US**

**3939 WEBBER STREET
SARASOTA FL 34232-3752**

3. Date Incorporated or Qualified
08/18/1977

3a. Date of Last Report
04/05/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-1941237

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

23 Zip

Country

28 Zip

Country

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

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NEWELL, GEORGE M.
4563 TRAILS DR.
SARASOTA FL 34232**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME **DIMEO, FRANK**
STREET ADDRESS **3901 NOTTINGHAM DRIVE**
CITY-ST-ZIP **SARASOTA FL**

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME **D**
STREET ADDRESS **SEEBACH, RANDY**
CITY-ST-ZIP **619 HANCOCK AVE.
SARASOTA FL**

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE

3.1 TITLE ☒ Change ☐ Addition

NAME **D**
STREET ADDRESS **ANSPAUGH, PEPAR**
CITY-ST-ZIP **4718 E. TRAILS DRIVE
SARASOTA FL**

3.2 NAME
3.3 STREET ADDRESS **4009 45th Street East**
3.4 CITY-ST-ZIP **Bradenton, FL. 34208**

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME **PD**
STREET ADDRESS **NEWELL, GEORGE M**
CITY-ST-ZIP **4563 TRAILS DRIVE
SARASOTA FL**

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☒ DELETE

5.1 TITLE ☐ Change ☒ Addition

NAME **D**
STREET ADDRESS **STONER, WILLIAM E**
CITY-ST-ZIP **4481 OAK VIEW DRIVE
SARASOTA FL**

5.2 NAME
5.3 STREET ADDRESS **MARK DAVIS**
5.4 CITY-ST-ZIP **2518 TULIP STREET
SARASOTA, FL. 34239**

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME **D**
STREET ADDRESS **BLEVINS, JOHN**
CITY-ST-ZIP **4873 ASHTON ROAD
SARASOTA FL**

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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.

(GEORGE M. NEWELL)

CR2E037 (9/96)