

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 743841

**FILED**  
**Jan 04, 2010**  
**Secretary of State**

**Entity Name:** TRINITY UNITED CHURCH OF CHRIST OF ST. PETERSBURG, FLORIDA, INC.

**Current Principal Place of Business:**

1150- 49TH. STREET NORTH  
ST. PETERSBURG, FL 33710

**New Principal Place of Business:**

**Current Mailing Address:**

1150- 49TH. STREET NORTH  
ST. PETERSBURG, FL 33710

**New Mailing Address:**

4921 11TH AVE NORTH  
ST. PETERSBURG, FL 33710

**FEI Number:** 59-0791049

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STEVENS, SHIRLEY  
6608 NORTH CHURCH AVENUE  
TAMPA, FL 33614 US

**Name and Address of New Registered Agent:**

DUNAWAY-ALT, SHARON  
5410 8TH AVE SOUTH  
GULFPORT, FL 33707 US

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: SHARON DUNAWAY-ALT

01/04/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DUNAWAY-ALT, SHARON  
Address: 5410 8TH AVE SOUTH  
City-St-Zip: GULFPORT, FL 33707

Title: VP  
Name: CLEMENT, DONNA  
Address: 6608 CHURCH AVE  
City-St-Zip: TAMPA, FL 33614

Title: T  
Name: SEYLER, MARTHA  
Address: 3155 FEATHERWOOD CT.  
City-St-Zip: CLEARWATER, FL 33759

Title: S  
Name: GILBERT, SUSAN  
Address: 176 20TH AVE SE  
City-St-Zip: SAINT PETERSBURG, FL 33705

I hereby 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 all other like empowered.

SIGNATURE: SHARON DUNAWAY-ALT

PRES

01/04/2010

Electronic Signature of Signing Officer or Director

Date