

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744665

FILED  
Apr 20, 2009  
Secretary of State

**Entity Name:** TRIUMPH APOSTOLIC FAITH CHURCH, INC.

**Current Principal Place of Business:**

1834 GEORGE ST.  
ATLANTIC BEACH, FL 32233

**New Principal Place of Business:**

**Current Mailing Address:**

1834 GEORGE ST.  
ATLANTIC BEACH, FL 32233

**New Mailing Address:**

**FEI Number:** 59-1994968

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, JOANN  
9646 NORFOLK BLVD  
JACKSONVILLE, FL 32208 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: P ( ) Delete  
Name: SMITH, JOANN  
Address: 9646 NORFOLK BLVD  
City-St-Zip: JACKSONVILLE, FL 32208

Title: V ( ) Delete  
Name: BASINE, DELORIS  
Address: 2427 AUTOMOBILE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32205

Title: D ( ) Delete  
Name: GOMEZ, SHARON  
Address: 2826 RIVER OAKS DR  
City-St-Zip: ORANGE PARK, FL 32073

Title: D ( ) Delete  
Name: BASINE, ROBERT LEE  
Address: 2427 AUTOMOBILE DR.  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: BLACK, GENE  
Address: 122 WEST 63RD ST  
City-St-Zip: JACKSONVILLE, FL

Title: S ( ) Delete  
Name: BLACK, DEBORAH  
Address: 122 WEST 63RD STREET  
City-St-Zip: JACKSONVILLE, FL 32207

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: V (X) Change ( ) Addition  
Name: BLACK, DEBORAH A  
Address: 122 W. 63RD. ST..  
City-St-Zip: JACKSONVILLE, FL 32207

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

Title: D (X) Change ( ) Addition  
Name: BASINE, ROBERT L  
Address: 2427 AUTOMOBILE DR.  
City-St-Zip: JACKSONVILLE, FL 32207

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

Title: S (X) Change ( ) Addition  
Name: MCINTYRE, MARVYNNE  
Address: 381 SARGO RD.  
City-St-Zip: ATLANTIC BEACH,, FL 32207

I hereby certify that the information supplied with this filing does not qualify 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: JOANN SMITH

P.

04/20/2009

Electronic Signature of Signing Officer or Director

Date