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Feb 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # 747204 (6) 1. Corporation Name TRINITY HOLINESS CHURCH OF WINTER BEACH, INC.		



Principal Place of Business 4545 71ST ST AND CEMETERY RD. P.O. BOX 248 WINTER BEACH FL 32971		Mailing Address 4545 71ST ST AND CEMETERY RD. P.O. BOX 248 WINTER BEACH FL 32971	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 05/16/1979		4. FEI Number 59-1923664	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent JOHNSON, REV. JAMES H. 71ST STREET AND CEMETERY RD. WINTER BEACH FL 32971		10. Name and Address of New Registered Agent 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	PD	1.1 TITLE	
NAME	JOHNSON, REV. JAMES H.	1.2 NAME	
STREET ADDRESS	4545-71ST & CEMETARY RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER BEACH FL	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	
NAME	JOHNSON, LOUISE	2.2 NAME	
STREET ADDRESS	4545-71ST & CEMETARY RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER BEACH FL	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	
NAME	STARNES, ED	3.2 NAME	
STREET ADDRESS	3304 METZGER RD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. PIERCE FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	GRICE, JAMES H	4.2 NAME	
STREET ADDRESS	956 18TH AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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.

SIGNATURE: *Rev. James H. Johnson* **SIGNATURE REQUIRED**

1/13/98

CR2E037 (10/97)