

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 14, 2006 8:00 am
Secretary of State

03-14-2006 90019 032 ****61.25

DOCUMENT # 747802 1. Entity Name TRINITY CHURCH OF THE NAZARENE INC.					
Principal Place of Business 1000-55TH STREET SOUTH GULFPORT FL 33707			Mailing Address 1000-55TH STREET SOUTH GULFPORT FL 33707		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1696007 ☐ Applied For ☐ Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BELUS, DENNIS E REV 2521 - 2ND AVE. N. ST. PETERSBURG FL 33713				7. Name and Address of New Registered Agent Name Rev. DENNIS E. Belus Street Address (P.O. Box Number is Not Acceptable) 2521-2ND AVE. N. ST. PETERSBURG, City ST. PETERSBURG FL Zip Code 33713	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>Rev. Dennis E. Belus</i> / Rev. DENNIS E. Belus 2-23-06 Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARRICELLA, LORRAINE 5417 JERSEY AVE SOUTH GULFPORT FL 33707 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kelly Venia 2521-2ND AVE. N. ST. PETERSBURG, FL. 33713 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TT GROSSO, MARIE 5405 11TH AVE SOUTH GULFPORT FL 33707 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARK Venia 2521-2ND AVE. N. ST. PETERSBURG, FL. 33713 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS RYAN, JUDY 5425 11TH AVE SOUTH GULFPORT FL 33707 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERT LINDSEY 11TH AVE. S. GULFPORT, FL. 33707 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANNON, GARY 5405 11TH AVE SOUTH GULFPORT FL 33707 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARY LINDSEY 11TH AVE. S. GULFPORT, FL. 33707 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COUCHMAN, JENNIFER 5401 17TH AVE SOUTH GULFPORT FL 33707 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP MARY Belus 2521-2ND AVE. N. ST. PETERSBURG, FL. 33713 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COUCHMAN, KENNETH 5401 17TH AVE SOUTH GULFPORT FL 33707 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DENNIS Belus 2521-2ND AVE. N. ST. PETERSBURG, FL. 33713 ☐ Change ☒ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Rev. Dennis E. Belus* / **Rev. DENNIS E. Belus** **2-23-06 (727)321-4998**