

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2008 08:00 AM
Secretary of State

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
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DO NOT WRITE IN THIS SPACE



06052008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1696007	Applied For Not Applicable
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. SAINT PETERSBURG, FL 33713	DO NOT WRITE IN THIS SPACE
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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VENIA, KELLY 2521 2ND AVE N SAINT PETERSBURG, FL 33713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINDSEY, ROBERT 11TH AVE S GULFPORT, FL 33707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINDSEY, MARY 11TH AVE S GULFPORT, FL 33707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP BELUS, MARY 2521 - 2ND AVE N SAINT PETERSBURG, FL 33713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BELUS, DENNIS 2521 - 2ND AVE N SAINT PETERSBURG, FL 33713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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06/09/08-80001-003 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 **6/5/08** **(727) 656-6209**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #