

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766771

FILED
Mar 23, 2007
Secretary of State

Entity Name: PORT RICHEY TRINITY CHURCH OF THE NAZARENE INC.

Current Principal Place of Business:

11038 LITTLE RD
NEW PORT RICHEY, FL 34654

New Principal Place of Business:

Current Mailing Address:

11038 LITTLE RD
NEW PORT RICHEY, FL 34654

New Mailing Address:

FEI Number: 59-1699970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANNON, JAMES D
6909 TIERRA LINDA STREET
PORT RICHEY, FL 34668 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: BRANNON, JAMES D
Address: 6909 TIERRA LINDA STREET
City-St-Zip: PORT RICHEY, FL 34668

Title: S () Delete
Name: DAVISON, NONA
Address: 13840 STONERIDGE DRIVE
City-St-Zip: HUDSON, FL 34669

Title: T () Delete
Name: WIPERT, DON
Address: 9604 STAR TRAIL
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: D () Delete
Name: WHITTAMORE, TOM
Address: 7431 CANVASBACK DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: D () Delete
Name: IVINS, HUBERT
Address: 7804 LOTUS DRIVE
City-St-Zip: PORT RICHEY, FL 34668

Title: D () Delete
Name: WOOD, JAMI K
Address: 8216 BAYTREE DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: WIPERT, DON
Address: 9604 STAR TRAIL
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: D (X) Change () Addition
Name: SWOGGER, DON
Address: 9624 BRASSIE COURT
City-St-Zip: NEW PORT RICHEY, FL 34655

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

Title: T (X) Change () Addition
Name: WOOD, JAMI K
Address: 8216 BAYTREE DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMI K. WOOD

T

03/23/2007

Electronic Signature of Signing Officer or Director

Date