2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 770278

SIGNATURE:

Mar 28, 2002 8:00 am Secretary of State 02-13-2002 90145 026 ****61.25 TRINITY CHRISTIAN FELLOWSHIP, INCORPORATED Principal Place of Business Mailing Address 1300N FIELDLARK LANE Mr. Joshua Bullard, III 22901 SW 117 AVE 19661 SW 136th Ave MIAMI FL 33170 HOMESTEAD FL 33035 Miami FL 33177-4142 US 2. Principal Place of Business Mr. Joshua Bullard, III Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 19661 SW 136th Ave Miami FL 33177-4142 City & State 4. FEI Number Applied For 65-0117419 Not Applicable Zip Country \$8.75 Additional 5. - Certificate of Status Desired . Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BULLARD, JOSHUA, III Mr. Joshua Bullard, III 1340 N FIELDLARK LANE 19661 SW 136th Ave Miami FL 33177-4142 HOMESTEAD FL 33035 Zip Code City FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE BULLARD, JOSHUA, III NAME STREET ADORESS STREET ADDRESS 13518 SW 118TH PLACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL B VST CARTER, JAMES TITLE ☐ Delete TITLE Addition NAME DIRECTOR NAME STREET ADDRESS 15081 SW 127TH COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI.FL----Change ☐ Addition TITLE Delete BULLARD, MARY M. NAME STREET ANDRES 43519-SW-116TH-PLACE STREET ACCRESS CITY-ST-ZIP CITY-ST-ZIP MIÁMI FL Delete TITLE TITLE ☐ Change ☐ Addition **BULLARD, JOHNNYCE** NAME NAME STREET ADDRESS STREET ADDRESS 12705 S.W. 92 CT. CITY-ST-7IP CITY-ST-7IP MIAMI FL 33176 TITLE ☐ Delete TITLE ☐ Change ☐ Addition ANTHONY, CLARANCE NAME STREET ADDRESS 14913 SW 302 TERR STREET ADDRESS. CITY-ST-ZIP CITY-ST-ZIP LEISURE CITY FL ☐ Addition TITLE Delete TITLE NAME ANTHONY, RUBY NAME STREET ADDRESS 14913 SW 302 TERR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LEISURE CITY FL 12. 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 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 expowered.

FILED

305-245-7000 Ex2