

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000003047

**FILED**  
**Mar 30, 2011**  
**Secretary of State**

**Entity Name:** JOYCE HUNTER MINISTRIES, TRINITY PRAISE AND WORSHIP CENTER, INC.

**Current Principal Place of Business:**

4846 EAST US HWY 90  
LAKE CITY, FL 32055

**New Principal Place of Business:**

**Current Mailing Address:**

302 SE ST. JOHNS STREET  
LAKE CITY, FL 32025

**New Mailing Address:**

**FEI Number:** 59-3645369

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HUNTER, JOYCE  
302 S.E. ST. JOHNS STREET.  
LAKE CITY, FL 32025 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: CD  
Name: HUNTER, JOYCE  
Address: 302 S.E. ST JOHNS STREET  
City-St-Zip: LAKE CITY, FL 32025

Title: CD  
Name: HUNTER, W L  
Address: 302 S.E. ST. JOHNS STREET  
City-St-Zip: LAKE CITY, FL 32025

Title: CD  
Name: LASHLEY, EMORY  
Address: 540 CHERRY DR  
City-St-Zip: LAKE CITY, FL 32025

Title: CD  
Name: REEVES, MURRAY  
Address: 390 SE COUNTY ROAD 337  
City-St-Zip: TRENTON, FL 32693

I hereby 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 all other like empowered.

SIGNATURE: W L HUNTER

CD

03/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date