

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000008070

FILED  
Sep 13, 2002  
Secretary of State

Entity Name: TRINITY WORLD MISSIONS INCORPORATED

## Current Principal Place of Business:

4020 58TH AVE. NORTH #2  
ST. PETERSBURG, FL 33714

## New Principal Place of Business:

4321 81ST AVENUE NORTH  
PINELLAS PARK, FL 33781 US

## Current Mailing Address:

4020 58TH AVE. NORTH #2  
ST. PETERSBURG, FL 33714

## New Mailing Address:

4321 81ST AVENUE NOTH  
PINELLAS PARK, FL 33781 US

FEI Number: 59-3693811

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NOSAMIEFAN, CHISA  
4020 58TH AVE. NORTH #2  
ST. PETERSBURG, FL 33714

## Name and Address of New Registered Agent:

NOSAMIEFAN, CHISA  
4321 81ST AVENUE NOTH  
PINELLAS PARK, FL 33781

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: NOSAMIEFAN, CHISA

09/13/2002

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PCD ( ) Delete  
Name: NOSAMIEFAN, OYEMWIMINA  
Address: 4020 58TH AVENUE NORTH #2  
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: WVCD ( ) Delete  
Name: NOSAMIEFAN, CHISA  
Address: 4020 58TH AVENUE NORTH #2  
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: D ( ) Delete  
Name: EDOKPOLO, JOSEPH  
Address: 4350 JIMMY CARTER BLVD #1001  
City-St-Zip: NORCROSS, GA 30093

Title: D ( ) Delete  
Name: ABU, DOROTHY  
Address: 4350 JIMMY CARTER BLVD #1001  
City-St-Zip: NORCROSS, GA 30093

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change ( ) Addition  
Name: NOSAMIEFAN, OYEMWIMINA  
Address: 4321 81ST AVENUE NORTH  
City-St-Zip: PINELLAS PARK, FL 33781

Title: WVCD (X) Change ( ) Addition  
Name: NOSAMIEFAN, CHISA  
Address: 4321 81ST AVENUE NORTH  
City-St-Zip: PINELLAS PARK, FL 33781

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NOSAMIEFAN, OYEMWIMINA

PCD

09/13/2002

Electronic Signature of Signing Officer or Director

Date