

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2005 8:00 am
Secretary of State

05-13-2005 90221 021 ****61.25

DOCUMENT # N01000004920

1. Entity Name
TRINITY BAPTIST CHURCH OF PALM BAY, INC.



Principal Place of Business
2803 PALM BAY RD NE
PALM BAY, FL 32905

Mailing Address
P.O. BOX 061452
PALM BAY, FL 32906

50052130



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04222005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
52-2306859

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STEPHENS, JOSEPH A REV
675 S.E. STOW TERRACE
PORT ST LUCIE, FL 34984

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete
NAME STEPHENS, JOSEPH A
STREET ADDRESS 675 S.E. STOW TERRACE
CITY-ST-ZIP PORT ST LUCIE, FL 34984

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME MILLER, ROBERT
STREET ADDRESS 200 NEVADA DRIVE N.E.
CITY-ST-ZIP PALM BAY, FL 32907

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ST ☐ Delete
NAME STEWART, CYNTHIA M
STREET ADDRESS 1570 HALSTEAD AVENUE N.W.
CITY-ST-ZIP PALM BAY, FL 32907

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME ASHER, WINSTON L
STREET ADDRESS 118 DONNA ROAD N.E.
CITY-ST-ZIP PALM BAY, FL 32907

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME STEWART, JUSTIN R
STREET ADDRESS 1570 HALSTEAD AVENUE N.W.
CITY-ST-ZIP PALM BAY, FL 32907

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME ABRAHAM, NEIL C
STREET ADDRESS 1355 CHERRY HILLS ROAD N.E.
CITY-ST-ZIP PALM BAY, FL 329053701

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 empowered.

SIGNATURE:

Joseph A. Stephens
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 11th 2005
Date

Date

Daytime Phone #