

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003835

FILED  
Mar 23, 2008  
Secretary of State

**Entity Name:** TRINITY THEOLOGICAL SEMINARY OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

2805 AVENUE T  
FORT PIERCE, FL 34950

**New Principal Place of Business:**

**Current Mailing Address:**

6255 33RD MANOR  
VERO BEACH, FL 32966

**New Mailing Address:**

**FEI Number:** 42-1603637

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JOHNSON-DAVIS, BLANCHE, DR PD  
6255 33RD MANOR  
VERO BEACH, FL, FL 32966 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: PD ( ) Delete  
Name: JOHNSON-DAVIS, BLANCHE DR  
Address: 6255 33 MANOR  
City-St-Zip: VERO BEACH, FL 32966 US

Title: VP/D ( ) Delete  
Name: BALL, LETETE M  
Address: 5321 NE 8TH AVENUE  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: AD ( ) Delete  
Name: CLARK, WALTER DR  
Address: 2541 NW 12TH COURT  
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: ACCT ( ) Delete  
Name: MITCHELL, GREGORY A  
Address: 510 SW 13TH PLACE  
City-St-Zip: DEERFIELD BEACH, FL 33441 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 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: DR. BLANCHE JOHNSON-DAVIS

P

03/23/2008

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

\_\_\_\_\_  
Date