

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009725

FILED  
Jul 22, 2005  
Secretary of State

**Entity Name:** TRINITY FELLOWSHIP CHRISTIAN CENTER, INC.

**Current Principal Place of Business:**

1437 19TH STREET  
ORLANDO, FL 32805

**New Principal Place of Business:**

585 SPRING LEAP CIRCLE  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

P.O. BOX 911  
GOTHA, FL 34734

**New Mailing Address:**

**FEI Number:** 35-2239096      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

AXSON, YOLANDA V  
1437 19TH STREET  
ORLANDO, FL 32805      US

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

AXSON, YOLANDA V  
585 SPRING LEAP CIRCLE  
WINTER GARDEN, FL 34787      US

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: \_\_\_\_\_

07/22/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: SCOTT, GARY E  
Address: 1437 19TH STREET  
City-St-Zip: ORLANDO, FL 32805 US

Title: S      ( ) Delete  
Name: AXSON, YOLANDA V  
Address: 1437 19TH STREET  
City-St-Zip: ORLANDO, FL 32805

Title: T      ( ) Delete  
Name: TOLLIVER, BRELEND  
Address: 6322 MACKENZIE STREET  
City-St-Zip: ORLANDO, FL 32807

Title: TR      ( ) Delete  
Name: AXSON, LESTER S SR.  
Address: 1437 19TH STREET  
City-St-Zip: ORLANDO, FL 32805

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

Title: P/D      (X) Change ( ) Addition  
Name: SCOTT, GARY E  
Address: 585 SPRING LEAP CIRCLE  
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: S/D      (X) Change ( ) Addition  
Name: AXSON, YOLANDA V  
Address: 585 SPRING LEAP CIRCLE  
City-St-Zip: WINTER GARDEN, FL 34787

Title: T/D      (X) Change ( ) Addition  
Name: TOLLIVER, BRELEND  
Address: 6322 MACKENZIE STREET  
City-St-Zip: ORLANDO, FL 32807

Title: TR/D      (X) Change ( ) Addition  
Name: AXSON, LESTER S SR.  
Address: 585 SPRING LEAP CIRCLE  
City-St-Zip: WINTER GARDEN, FL 34734

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: YOLANDA V. AXSON

S/D

07/22/2005

Electronic Signature of Signing Officer or Director

Date