

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011994

FILED
Mar 09, 2009
Secretary of State

Entity Name: TRINITY EVANGELICAL ANGLICAN FELLOWSHIP, INC.

Current Principal Place of Business:

3750 SAN JOSE PLACE
32
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 57308
JACKSONVILLE, FL 32241 US

New Mailing Address:

P.O. BOX 57308
JACKSONVILLE, FL 32241

FEI Number: 20-2088175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BULLOCK, BRUCE S
5515 PHILLIPS HWY
JACKSONVILLE, FL 32207 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: DIR () Delete
Name: DOUGHERTY, BRUCE
Address: 10840 CHEATHAM TRAIL
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: DIR () Delete
Name: ANDERSON, MARY
Address: 2973 BRIDLEWOOD LANE
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: DIR () Delete
Name: DANIEL, RALPH
Address: 11123 ZEPHYR WAY
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: DIR () Delete
Name: ABRAHAM, MICHAEL
Address: 1211 S. KYLE WAY
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: DIR () Delete
Name: YOUSE, DAVID
Address: 2770 LORETTA ROAD
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: REV () Delete
Name: STRICKLAND, LEONARD E
Address: 12727 DUNNS VIEW DRIVE
City-St-Zip: JACKSONVILLE, FL 32218 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DIR (X) Change () Addition
Name: ROSS, WAGER
Address: 1983 GREEN HERON POINT
City-St-Zip: JACKSONVILLE, FL 32250 US

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: HENRY GLOVER

ADM

03/09/2009

Electronic Signature of Signing Officer or Director

Date