## 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N1000005300

Feb 13, 2014 Secretary of State

Entity Name: TRINTOLOGY MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

801 N POINT PKWY 1450 BRICKELL BAY DR.

WEST PALM BEACH, FL 33407 MIAMI, FL 33133

Current Mailing Address: New Mailing Address:

801 N POINT PKWY
WEST PALM BEACH, FL 33407

1450 BRICKELL BAY DR.
MIAMI, FL 33133

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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: ELIZABETH A SMITH

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: [

Name: BURNS, FLOSSIE
Address: PO BOX 420667
City-St-Zip: HOUSTON, TX 77342

Title: D

Name: HALE, PETER R

Address: 7191 VINELAND AVE. #322 City-St-Zip: ORLANDO, FL 32821

Title: S

Name: CHERRY, RACQUEL
Address: PO BOX 420667
City-St-Zip: HOUSTON, TX 77342

Title:

 Name:
 TEEL, MONICA

 Address:
 999 GAY RD.

 City-St-Zip:
 BILOXI, MS 39532

Title:

Name: TEEL, LADON Address: 999 GAY RD. City-St-Zip: BILOXI, MS 39532

Title:

 Name:
 HUDSON, MICHELLE

 Address:
 7191 VINELAND AVE. #322

 City-St-Zip:
 ORLANDO, FL 32821

I hereby 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 all other like empowered.

SIGNATURE: MICHELLE HUDSON P 02/13/2014