

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17419

FILED  
Jan 20, 2005  
Secretary of State

**Entity Name:** TRINITY BAPTIST CHURCH OF MARIANNA, INC.

**Current Principal Place of Business:**

3023 PENNSYLVANIA AVE.  
MARIANNA, FL 32446

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1068  
MARIANNA, FL 32446

**New Mailing Address:**

PO BOX 1068  
MARIANNA, FL 32447

FEI Number: 59-2319007

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

RABON, GEORGE R  
4858 DONNA DRIVE  
MARIANNA, FL 32446 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: PCD ( ) Delete  
Name: MITCHELL, JOHN B  
Address: 4427 WOODBROOK DRIVE  
City-St-Zip: MARIANNA, FL 32446

Title: VPD ( ) Delete  
Name: STANDLAND, JIMMY  
Address: 4373 DEERING STREET  
City-St-Zip: MARIANNA, FL 32446

Title: SD ( ) Delete  
Name: YOUNG, STEVEN T  
Address: 4737 SCENIC VIEW ROAD  
City-St-Zip: MARIANNA, FL 32446

Title: D ( ) Delete  
Name: SMITH, PHILLIP  
Address: 4252 LARAMORE ROAD  
City-St-Zip: MARIANNA, FL 32448

**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 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: JOHN B. MITCHELL

PCD

01/20/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date