

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N33280

**FILED**  
**May 07, 2011**  
**Secretary of State**

**Entity Name:** TRINITY CHRISTIAN METHODIST EPISCOPAL CHURCH, INC.

**Current Principal Place of Business:**

2401 NORTH HOWARD AVENUE  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

2401 N HOWARD AVENUE  
TAMPA, F 33607

**New Mailing Address:**

**FEI Number:** 59-3247857

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, JOE L  
10144 ARBOR RUN DR  
UNIT 9  
TAMPA, FL 33647 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: D  
Name: JOHNSON, JOE L  
Address: 10144 ARBOR RUN DR, UNIT 9  
City-St-Zip: TAMPA, FL 33647

Title: D  
Name: RICHARD, IMOGENE  
Address: 8405 ASH AVE.  
City-St-Zip: TAMPA, FL 33619

Title: D  
Name: SAVAGE, LLOYD  
Address: 1710 W. CHERRY  
City-St-Zip: TAMPA, FL 33607

Title: D  
Name: LORRIANNE, CARTER  
Address: 2401 HOWARD  
City-St-Zip: TAMPA, FL 33607 US

Title: D  
Name: SARGENT, LARRY F  
Address: 6703 HARBOR VIEW WAY  
City-St-Zip: TAMPA, FL 33615

Title: D  
Name: HOPKINS, MICHAEL  
Address: 1027 E. 12TH AVE.  
City-St-Zip: TAMPA, FL 33605

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: MICHAEL HOPKINS

D

05/07/2011

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

\_\_\_\_\_  
Date