2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 28, 2007 8:00 am Secretary of State DOCUMENT # N41294 1. Entity Name 03-28-2007 90017 029 ****61.25 TRINITY COMMUNITY CHURCH OF LEE COUNTY, INC. Principal Place of Business Mailing Address 2756 MCGREGOR BLVD. 2756 MCGREGOR BLVD. FT. MYERS FL 33901 FT. MYERS FL 33901 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 65-0235170 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WINTERS, WILLIAM E. Street Address (P.O. Box Number is Not Acceptable) 16350 FAİRWAY WOODS DR **UNIT 1802** FT. MYERS FL 33908 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 STD **⊠** Delete PD Change RHIT Ш Addition NAME JAMES CONNELL HOOKER, ROBERT E NAME 13551 STRATFORD PL. #205 STREET ADDRESS 230 S.E. 20TH CT. STREET ADDRESS FORT MYERS FL 33919 CITY-ST-7(P CITY ST ZP CAPE CORAL FL 33990 PRESIDENT TITLE ☐ Delete Change TITLE ☐ Addition NAMI LOVELAND, DAVID M NAME STREET ADDRESS STREET ADDRESS 3064 SLVESTRE DR CITY - S1 - 7IP CHY ST 7P FORT MYERS FL 33901 VICE PRESIDENT **X** Change 10110 Dolete THE ☐ Addition NAME KREAGER, JOAN C NAME STREET ADDRESS STREET ADDRESS 16569 BEAR CUB DR CITY - ST- 7IP CHY ST-7IP FORT MYERS FL 33908 TITLE ☐ Delete TITLE Change ☐ Addition D NAME NAME WINTERS, WILLIAM E. STREET ADDRESS STREET ADDRESS 16350 FAIRWAY WOODS DRIVE CITY - ST-7IP CHY ST 78P FT. MYERS FL THIF Delete ☐ Change ■ Addition NAME NAMI STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY ST ZIP HHLE ☐ Delete THEF Change Addition NAME NAME STRLET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CHY-ST 7IP

SIGNATURE:

CHY-SI-ZIP

JENNES (STILL SIGNING OFFICER OR DIRECTOR

3/1/07

FILED

239-332.3299