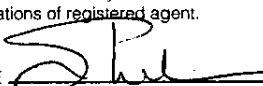
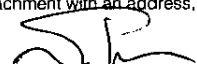


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2004 8:00 am
Secretary of State

03-04-2004 90011 023 ****61.25

DOCUMENT # N93000002035 1. Entity Name TRINITY UNITED METHODIST CHURCH OF ARCADIA FLORIDA INC.					
Principal Place of Business 304 WEST OAK STREET ARCADIA, FL 33821			Mailing Address 304 WEST OAK STREET ARCADIA, FL 33821		
2. Principal Place of Business 304 W OAK ST		3. Mailing Address 304 W OAK ST			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State ARCADIA FL		City & State ARCADIA FL		4. FEI Number 59-0718501	
Zip 34266		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PORCH, JANIS 445 E LEE AVE ARCADIA, FL 34266			7. Name and Address of New Registered Agent Name SUSAN LAUBHAN Street Address (P.O. Box Number is Not Acceptable) 1378 NE MANLEY RD City ARCADIA FL Zip Code 34266		
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  SUSAN LAUBHAN - P 1/9/04 (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PORCH, JANIS 445 N LEE AVE ARCADIA, FL 34266	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SUSAN LAUBHAN 1378 N.E. MANLEY RD ARCADIA FL 34266
☒ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, GEORGE 407 N MANATEE AVE ARCADIA, FL 34266	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHN JOHNSON PO BOX 482 FT OGDEN FL 34267
☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PHILLIPS, JOHN 420 N OAK ST ARCADIA, FL 34266	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BYRON BARNY 3346 NE OUTMANNS ST ARCADIA FL 34266
☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WATERS, ANGELA 1760 SE PLUM DR ARCADIA, FL 34266	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHELLY WATERS 2735 SE DURANGO ST ARCADIA FL 34266
☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC LENZ, JOHN 4268 SW LANGFORD ST ARCADIA, FL 34266	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUSAN BARNES 1295 SE AIRPORT RD ARCADIA FL 34266
☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROE, PEGGY 4015 SE COUNTY RD 760 ARCADIA, FL 34266	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DAVID JONES 251 N. HERNANDO AVE ARCADIA FL 34266
☐ Change ☒ Addition					
12. I hereby certify that the information supplied with this filing does not qualify 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 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.					
SIGNATURE:  SUSAN LAUBHAN 1/9/04 (863) SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

~~Attachment~~

N93000002035

D
Katie Lou Carlton
PO Box 340
Nocatee, FL 34268

Addition