

**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 91218 031 \*\*\*\*61.25

**DOCUMENT # N93000005687**

1. Entity Name

TRINITY WOMEN'S MINISTRIES INC.



Principal Place of Business

2404 GRANT STREET  
MELBOURNE FL 32901

Mailing Address

2404 GRANT STREET  
MELBOURNE FL 32901

24066619



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3197504

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

OLIVER, AMY  
3412 JAMES ST.  
MELBOURNE FL 32901

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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**  
**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

TITLE NAME  Delete  
P OLIVER, AMY  
STREET ADDRESS 8412 JAMES STREET  
CITY-ST-ZIP MELBOURNE FL

TITLE NAME  Delete  
T JOHNSON, DORETHA  
STREET ADDRESS 505 ROBERTS ST.  
CITY-ST-ZIP MELBOURNE FL

TITLE NAME  Delete  
D CHATFIELD, LOIS  
STREET ADDRESS 2404 GRANT STREET  
CITY-ST-ZIP MELBOURNE FL

TITLE NAME  Delete  
1VP BEAUFORT, VIOLA  
STREET ADDRESS 3203 S. MONROE ST.  
CITY-ST-ZIP MELBOURNE FL

TITLE NAME  Delete  
F FRANCIS, LEONA  
STREET ADDRESS 1005 NEVADA DR NE  
CITY-ST-ZIP PALM BAY FL

TITLE NAME  Delete  
S BROXTON, WILLIE M  
STREET ADDRESS 568 E ROBERTS ST  
CITY-ST-ZIP MELBOURNE FL 32901

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME  Change  Addition  
STREET ADDRESS  
CITY-ST-ZIP

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: \_\_\_\_\_

AMY S. OLIVER  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-29-04