2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001771

FILED Jan 04, 2005 Secretary of State

Entity Nan	ne: TRINITY	MINISTRIES SOCIAL SERVICES,	NC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1170 SUNS SUNRISE,					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1170 SUNS SUNRISE,					
FEI Number:	65-0586512	FEI Number Applied For ()	El Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	3 H RELINE TERF RES, FL 334				
The above in the State		submits this statement for the purpo	ose of changing its registered	d office or registered agent, or both,	
SIGNATUR					
	Electro	nic Signature of Registered Agent		Date	
OFFICERS	AND DIREC	CTORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (LYNCH, WINS 1170 SUNSET SUNRISE, FL	STRIP	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	*		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (LYNCH, LINDA 1170 SUNSET SUNRISE, FL	STRIP	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: G. HORATIO LOUDEN D 01/04/2005