


2005 **NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 07, 2005 8:00 am
Secretary of State

04-07-2005 90034 038 ****61.25

DOCUMENT # N196000001126	
1. Entity Name Trinity Free Will Baptist Church of Lakeland Inc.	

DO NOT WRITE IN THIS SPACE

50034813

2. Principal Place of Business 2649 Mineola Dr. Suite, Apt. #, etc. Lakeland, FL. City & State	3. Mailing Address 2649 Mineola Dr. Suite, Apt. #, etc. Lakeland, FL. City & State
Zip 33801 Country U.S.A.	Zip 33801 Country U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-324508	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Curles, Lee
Street Address (P.O. Box Number is Not Acceptable) 2638 Ralph Rd.
City Lakeland FL Zip Code 33801

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 *J. Lee Curles*
Signature, typed or printed name of registered agent and title if applicable.

J. Lee Curles
Treasurer

4-3-05

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE T	NAME Curles, Lee	STREET ADDRESS 2638 Ralph Rd.	CITY-ST-ZIP Lakeland, FL. 33801
TITLE D	NAME Chaney, Robert	STREET ADDRESS 2736 Ave. R.	CITY-ST-ZIP Winter Haven, FL. 33881
TITLE D	NAME Lardrum, Harry	STREET ADDRESS 1624 Carter St.	CITY-ST-ZIP Auburndale, FL. 33823
TITLE D	NAME Fairless, Bill	STREET ADDRESS 1510 Ariana, 274	CITY-ST-ZIP Lakeland, FL. 33803
TITLE NAME	STREET ADDRESS	CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME	STREET ADDRESS	CITY-ST-ZIP	
TITLE NAME	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 on an attachment with an address, with all other like empowered.

SIGNATURE: *J. Lee Curles* *J. Lee Curles* *4-3-05* *863-669-9582*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037B (12/02)