

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004776

FILED  
Jan 10, 2006  
Secretary of State

Entity Name: TRUMPET MINISTRIES, INC.

**Current Principal Place of Business:**

5024 BASIN AVE  
MILTON, FL 32583 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 4016  
MILTON, FL 32572 US

**New Mailing Address:**

FEI Number: 59-2939937

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AMERILAWYER CHARTERED  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: TOLBERT, DAVID L  
Address: 5024 BASIN AVE  
City-St-Zip: MILTON, FL

Title: DST ( ) Delete  
Name: TOLBERT, JUDY E  
Address: 5024 BASIN AVE  
City-St-Zip: MILTON, FL

Title: D ( ) Delete  
Name: TOLBERT, JUDY E  
Address: 5024 BASIN AVE  
City-St-Zip: MILTON, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DAVID L. TOLBERT

DP

01/10/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date