

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 08, 2007 8:00 am**  
**Secretary of State**

05-08-2007 90019 032 \*\*\*\*61.25

**DOCUMENT # N99000001835**

1. Entity Name  
TRINITY UNITED METHODIST CHURCH, DELAND,  
FLORIDA, INC.



Principal Place of Business  
306 W. WISCONSIN AVE.  
DELAND, FL 32720

Mailing Address  
306 W. WISCONSIN AVE.  
DELAND, FL 32720

40108469



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03022007 Chg-NP CR2E037 (12/06)

4. FEI Number  
59-1496877

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORBIN, IVAN G REV  
306 W WISCONSIN AVE  
DELAND, FL 32720

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

**Filing Fee is \$61.25  
Due by May 1, 2007**

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	SD	<input type="checkbox"/> Delete
NAME	BEATY, DONNA	
STREET ADDRESS	2124 GLENWOOD HAMMOCK RD	
CITY-ST-ZIP	DELAND, FL 32720	
TITLE	PD	<input type="checkbox"/> Delete
NAME	FRIERSON, GERALD	
STREET ADDRESS	429 N CLARA AVE	
CITY-ST-ZIP	DELAND, FL 32720	
TITLE	D	<input type="checkbox"/> Delete
NAME	HARTMAN, BILL	
STREET ADDRESS	1225 GREENLAND HAMMOCK	
CITY-ST-ZIP	DELAND, FL 32720	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROBBINS, JON	
STREET ADDRESS	1237 CARDINAL LN	
CITY-ST-ZIP	DELAND, FL 32720	
TITLE	VD	<input type="checkbox"/> Delete
NAME	KELLOGG, ROBERT	
STREET ADDRESS	1220 WESLOOK DR	
CITY-ST-ZIP	DELAND, FL 32720	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DONALDSON, MITCH	
STREET ADDRESS	2231 RIVER RIDGE ROAD	
CITY-ST-ZIP	DELAND, FL 32720	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	EA Hencinski	
STREET ADDRESS	134 Leen Ave	
CITY-ST-ZIP	Deland, FL 32720	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mike Newberry	
STREET ADDRESS	1508 Ginger Snap Tr.	
CITY-ST-ZIP	Deland, FL 32720	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dave Gibbons	
STREET ADDRESS	1504 W. Silver Hammock	
CITY-ST-ZIP	Deland, FL 32720	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Linda McCormick	
STREET ADDRESS	1799 W. Beresford Ave.	
CITY-ST-ZIP	Deland, FL 32720	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jon Robbins	
STREET ADDRESS	P.O. Box 2114	
CITY-ST-ZIP	Deland, FL 32721-2114	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** *Gerald Frierson* **Gerald Frierson**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/23/07 386-734-4224**

Date

Daytime Phone #