

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 18, 2008  
Secretary of State**

DOCUMENT# N99000002080

Entity Name: TRINITY MINISTRIES CHURCH INC.

**Current Principal Place of Business:**

4327 EMERSON STREET  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

4327 EMERSON STREET  
JACKSONVILLE, FL 32207

**New Mailing Address:**

FEI Number: 59-3553461      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BRINSON, JIMMY JR  
4327 EMERSON STREET  
JACKSONVILLE, FL 32207      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: PD      ( ) Delete  
Name: BRINSON, JIMMIE JR  
Address: 3566 ROGERO ROAD  
City-St-Zip: JACKSONVILLE, FL 32277

Title: VD      ( ) Delete  
Name: HARRIS, JAMES  
Address: 11517 BIRCHFOREST CIRCLE E  
City-St-Zip: JACKSONVILLE, FL 32218

Title: TD      ( ) Delete  
Name: GREENE, EARL SR  
Address: 8244 MERIVALE ROAD  
City-St-Zip: JACKSONVILLE, FL 32208

**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 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: JIMMIE BRINSON JR.

PD

04/18/2008

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

\_\_\_\_\_  
Date