

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721264

Entity Name: THE TRINITY BAPTIST CHURCH OF JACKSONVILLE, INC.

Current Principal Place of Business:

800 HAMMOND BLVD.
JACKSONVILLE, FL 32221-1342

Current Mailing Address:

800 HAMMOND BLVD.
JACKSONVILLE, FL 32221-1342

FEI Number: 59-0774202

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES, ROBERT LIII
501 COMMENDENCIA STREET
PENSACOLA, FL 32502 US

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

Officer/Director Detail :

Title PD
Name MESSER, THOMAS CDR.
Address 8974 MOSEY ALONG COURT
City-State-Zip: JACKSONVILLE FL 32221

Title TD
Name HANEY, STEPHEN MR.
Address 1145 EMILY'S WALK LANE W.
City-State-Zip: JACKSONVILLE FL 32221

Title SD
Name MILLER, JAMES BMR.
Address 320-A VILLAGE DRIVE
City-State-Zip: ST. AUGUSTINE FL 32095

Title CFO
Name JUDD, GARY
Address 800 HAMMOND BLVD.
City-State-Zip: JACKSONVILLE FL 32221-1342

Title DIRECTOR OF FINANCE
Name GREGORY, DOUG
Address 800 HAMMOND BLVD.
City-State-Zip: JACKSONVILLE FL 32221-1342

Title T
Name COOKE, GARY
Address 800 HAMMOND BLVD.
City-State-Zip: JACKSONVILLE FL 32221-1342

Title TREASURER
Name MILLIGAN, JONATHAN
Address 800 HAMMOND BLVD.
City-State-Zip: JACKSONVILLE FL 32221-1342

Title TREASURER
Name WOODS, GORDON
Address 800 HAMMOND BLVD.
City-State-Zip: JACKSONVILLE FL 32221-1342

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I hereby 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 all other like empowered.

SIGNATURE: DOUG GREGORY

DIRECTOR OF FINANCE

01/20/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HEAVENER, MAC
Address 800 HAMMOND BLVD.
City-State-Zip: JACKSONVILLE FL 32221-1342