### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 770278** 

Entity Name: TRINITY CHRISTIAN FELLOWSHIP, INCORPORATED

FILED Feb 04, 2024 Secretary of State 0342289940CC

## **Current Principal Place of Business:**

22801 SW 117 AVE MIAMI. FL 33170

## **Current Mailing Address:**

LAVERNE HARVEY 876 NW 8TH STREET FLORIDA CITY, FL 33034 US

FEI Number: 65-0117419 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

HARVEY, LAVERNE PRESIDENT LAVERNE HARVEY 876 NW 8TH STREET FLORIDA CITY, FL 33034 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: LAVERNE HARVEY 02/04/2024

**Electronic Signature of Registered Agent** 

Date

### Officer/Director Detail:

Title PRESIDENT, PASTOR Title VP

NameHARVEY, LAVERNENameBURTON, VERONICA VPAddress876 NW 8TH STREETAddress10875 SW 216TH STREET

City-State-Zip: FLORIDA CITY FL 33034 City-State-Zip: GOULDS FL 33170

Title TREASURER, CEO Title DIRECTOR, ASST. TREASURER

Name ALLEN, TERRY DIRECTOR Name KEMP , SAMRA B

Address 684 NW 12TH STREET Address 11235 SW 220TH STREER

City-State-Zip: FLORIDA CITY FL 33034 City-State-Zip: GOULDS FL 33170

Title EXECUTIVE SECRETARY, CFO,

TREASURER

Name TAYLOR, DOMINIQUE
Address 26172 SW 124TH PLACE
City-State-Zip: NARANJA FL 33032

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: LAVERNE HARVEY

Electronic Signature of Signing Officer/Director Detail

PASTOR/PRESIDENT

02/04/2024