2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001175

Entity Name: TRINITY BAPTIST COLLEGE, INC.

Current Principal Place of Business:

800 HAMMOND BOULEVARD JACKSONVILLE. FL 32221

Current Mailing Address:

800 HAMMOND BOULEVARD JACKSONVILLE, FL 32221

FEI Number: 41-2270181 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

FILED Jan 29, 2021

Secretary of State

0330299944CC

Officer/Director Detail:

Title PD Title D

Name MESSER, THOMAS C Name MAC, HEAVENER JR.

Address 8974 MOSEY ALONG COURT Address 1172 EMILY'S WALK LANE W.

City-State-Zip: JACKSONVILLE FL 32221 City-State-Zip: JACKSONVILLE FL 32221

Title D. Title D.

Name LEE, TIM DR. Name WALLS, JERRY DR.

Address P.O. BOX 461674 Address 1040 SOUTH HOUSTON LAKE RD.

City-State-Zip: GARLAND TX 75046 City-State-Zip: WARNER ROBINS GA 31088

Title DIRECTOR Title D

Name COOKE, GARY Name ARCENEAUX, LARRY

Address 800 HAMMOND BOULEVARD Address 800 HAMMOND BOULEVARD

City-State-Zip: JACKSONVILLE FL 32221 City-State-Zip: JACKSONVILLE FL 32221

Title D Title [

Name CLOSS, HOWARD Name GIBSON, ED

Address 800 HAMMOND BOULEVARD Address 800 HAMMOND BOULEVARD

City-State-Zip: JACKSONVILLE FL 32221 City-State-Zip: JACKSONVILLE FL 32221

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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 01/29/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title D

Name PETERS, GREG

Address 800 HAMMOND BOULEVARD

City-State-Zip: JACKSONVILLE FL 32221

Title D

Name PEREZ, ED

Address 800 HAMMOND BOULEVARD

City-State-Zip: JACKSONVILLE FL 32221

Title MANAGER

Name GREGORY, DOUG

Address 800 HAMMOND BOULEVARD
City-State-Zip: JACKSONVILLE FL 32221

Title D

Name MCCLAFFERTY, TAMMIE

Address 800 HAMMOND BOULEVARD

City-State-Zip: JACKSONVILLE FL 32221

Title [

Name MAHAIRAS, TOM

Address 800 HAMMOND BOULEVARD

City-State-Zip: JACKSONVILLE FL 32221