

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 28, 2006 08:00 AM
Secretary of State

DOCUMENT # 849786

1. Entity Name
THE TRIPP CORPORATION



Principal Place of Business

2604 FAIRWAY DRIVE
JUPITER, FL 33477 US

Mailing Address

2604 FAIRWAY DRIVE
JUPITER, FL 33477 US



07072006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2309788	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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)

U00000572713
07/28/06-80010-012 150.00
DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P TRIPP, WILLIAM H 2604 FAIRWAY DRIVE JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP TRIPP, ANDREW E JR. 21 HARBOR HILL DRIVE HUNTINGTON, NY 11743
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TRIPP, WILLIAM H 2604 FAIRWAY DRIVE JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TRIPP, ANDREW E JR. 21 HARBOR HILL DRIVE HUNTINGTON, NY 11743
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #