## 2001 UNIFORM BUSINESS REPORT (UBR)

## Mar 05, 2001 8:00 am Secretary of State DOCUMENT # N9700003405 1. Entity Name TRINITY LAKES FOUNDATION, INC. 03-05-2001 90320 004 \*\*\*\*61.25 Principal Place of Business Mailing Address 150 MAGNOLIA AVENUE 150 MAGNOLIA AVENUE DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114 629791 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3452566 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) PALMETTO CHARTER SERVICES, INC. 150 MAGNOLIA AVENUE DAYTONA BEACH FL 32114 Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees **Dcpartment of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ☐ Addition TITLE ☐ Celete TITLE GLOVER, PETER M NAME NAME STREET ADDRESS 483 N BEACH ST STREET ADDRESS CITY-ST-ZIP **ORMOND BEACH FL 32174** CITY-ST-ZIP CD Delete TITLE Addition TITLE ☐ Change BLACK, HARRY H NAME NAME STREET ADDRESS 11 NOBLE WOODS WAY. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORMOND BEACH FL 32174 **X**¥Delete $\overline{\mathrm{DS}}$ TITI F TITLE \*Change Addition BROWN, DAVID NAME NAME Dana Smith STREET ADDRESS STREET ADDRESS 300 OAK DRIVE 5 Archangel Circle CITY-ST-ZIP CITY-ST-7IP ORMOND BEACH FL 32176 Ormond Beach, FL 32174 Delete ☐ Addition TITLE TITLE ☐ Change LAMM, JEFF NAME NAME STREET ADDRESS 4 SUGAR MILL LANE SOUTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FLAGLER BEACH FL 32136 TITLE Delete TITI F ☐ Change ☐ Addition NICHOLS, CHUCK NAME NAME 1796 WATERBURY LN STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ORANGE PARK FL 32073** XX Addition TITLE TITLE XX Delete Change HART, THOMAS S NAME NAME Carol Polzella 1207 N. Beach Street STREET ADDRESS STREET ADDRESS 150 MAGNOLIA AVE CITY-ST-ZIP DAYTONA BEACH FL 32144 Ormond Beach.

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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.

904-673-9146