

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17779

FILED
Apr 18, 2005
Secretary of State

Entity Name: TRIVEST GROUP, INC.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, STE. 800
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, STE. 800
MIAMI, FL 33133

New Mailing Address:

FEI Number: 06-1221904

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GERSHMAN, DAVID
2665 S. BAYSHORE DRIVE
SUITE 800
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MD () Delete
Name: VANDENBERG, PETER JR
Address: 2665 S.BAYSHORE DR, 8TH FL
City-St-Zip: MIAMI, FL

Title: DCP () Delete
Name: POWELL, EARL W
Address: 2665 S BAYSHORE DR STE. 800
City-St-Zip: MIAMI, FL 33133

Title: COO () Delete
Name: TEMPLETON, TROY D
Address: 2665 S BAYSHORE DR. STE. 800
City-St-Zip: MIAMI, FL 33133

Title: S () Delete
Name: KUFFNER, MARILYN D
Address: 2665 SOUTH BAYSHORE DRIVE 800
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: GEORGE, PHILLIP T M.D.
Address: 2601 S. BAYSHORE DRIVE STE 725
City-St-Zip: MIAMI, FL 33133

Title: VGC () Delete
Name: GERSHMAN, DAVID
Address: 2665 S. BAYSHORE DR, STE 800
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: FERNANDEZ, JORGE
Address: 2665 S.BAYSHORE DR, STE 800
City-St-Zip: MIAMI, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARILYN D KUFFNER

S

04/18/2005

Electronic Signature of Signing Officer or Director

Date