

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000032195

Entity Name: TRINITY INDEPENDENT LIVING CARE, CORP.

Current Principal Place of Business:

7344 COUNTRY RUN PARKWAY
ORLANDO, FL 32818

Current Mailing Address:

7344 COUNTRY RUN PARKWAY
ORLANDO, FL 32818 US

FEI Number: 83-0680019

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JUSTIN, YVRONIE
7344 COUNTRY RUN PARKWAY
ORLANDO, FL 32818 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

Officer/Director Detail :

Title PRES
Name JUSTIN, YVRONIE
Address 7344 COUNTRY RUN PARKWAY
City-State-Zip: ORLANDO FL 32818

Title VP
Name JUSTIN, KARLSON
Address 7344 COUNTRY RUN PARKWAY
City-State-Zip: ORLANDO FL 32818

Title S
Name DOMOND, JANIE
Address 7344 COUNTRY RUN PARKWAY
City-State-Zip: ORLANDO FL 32818

Title PRESIDENT
Name JUSTIN, YVRONIE
Address 1408 HART BLVD
City-State-Zip: ORLANDO FL 32818

Title VP
Name JUSTIN, KARLSON R
Address 1408 HART BLVD
City-State-Zip: ORLANDO FL 32818

Title SECRETARY
Name JANIE, DOMOND R
Address 1408 HART BLVD
City-State-Zip: ORLANDO FL 32818

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: YVRONIE JUSTIN

PRES

04/09/2021

Electronic Signature of Signing Officer/Director Detail

Date