## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 123878** 

Entity Name: TRINITY PARISH HOLDING CORPORATION

FILED Feb 22, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

464 N.E. 16TH ST. 464 NE 16TH ST.

MIAMI, FL 331321220 US MIAMI, FL 331321220 US

Current Mailing Address: New Mailing Address:

464 N.E. 16TH ST. 464 NE 16TH ST

MIAMI, FL 331321220 US MIAMI, FL 331321220 US

FEI Number: 59-0838103 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MUIR, WILLIAM T 550 BILTMORE WAY SUITE 810

CORAL GABLES, FL 33134 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

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: MCCALEB, DOUGLAS W DEAN

Address: 464 NE 16TH STREET City-St-Zip: MIAMI, FL 33132

Title: VPD

 Name:
 HARMS, ANNE L

 Address:
 7942 NW 158 TERRACE

 City-St-Zip:
 MIAMI LAKES, FL 33016

Title: VPD

Name: BLANTON, SHARIE

Address: 333 NE 24TH STREET, #1409

City-St-Zip: MIAMI, FL 33147

Title: TD

Name: NOLAN, JAMES T Address: 2545 BAY AVE

City-St-Zip: MIAMI BEACH, FL 33140

Title: S

Name: JAMIESON, LAURA
Address: 831 10TH STREET
City-St-Zip: MIAMI BEACH, FL 33139

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: JAMES T NOLAN TD 02/22/2011