

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 09, 1999 8:00 am
Secretary of State

04-09-1999 90066 048 ***150.00

DOCUMENT # 691693

1. Corporation Name
TRINITY-TRIDENT CORPORATION

Principal Place of Business
9310 WARING ROAD
PENSACOLA FL 32534
US

Mailing Address
9310 WARING ROAD
PENSACOLA FL 32534
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/23/1981

4. FEI Number

59-2113210

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 3341 McLemore Drive

Suite, Apt. #, etc.

City & State

23 Pensacola, FL

Zip

24 32514

Country

25 USA

2a. Mailing Address

26 3341 McLemore Drive

Suite, Apt. #, etc.

City & State

28 Pensacola, FL

Zip

29 32514

Country

30 USA

9. Name and Address of Current Registered Agent

COOLEY, BEVERLY
7255 PATRICK LANE
PENSACOLA FL 32526

10. Name and Address of New Registered Agent

81 Name Raymond P. Mayer

82 Street Address (P.O. Box Number is Not Acceptable)
1112 Quiet Creek Road

83

84 City Pensacola

FL

85 Zip Code
32514

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed (Name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

4/5/99

12. OFFICERS AND DIRECTORS

TITLE CPT ☐ DELETE

NAME KROHN, GEORGE B
STREET ADDRESS 2744 SANTA ROSA DRIVE
CITY-ST-ZIP LILLIAN AL

TITLE DVS ☐ DELETE

NAME KROHN, PHYLLIS G.
STREET ADDRESS 2744 SANTA ROSA DRIVE
CITY-ST-ZIP LILLIAN AL

TITLE DV ☒ DELETE

NAME O'CONNOR, CHRISTINE K.
STREET ADDRESS 3500 CREIGHTON ROAD
CITY-ST-ZIP PENSACOLA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME Mayer, Raymond P.
3.3 STREET ADDRESS 1112 Quiet Creek Road
3.4 CITY-ST-ZIP Pensacola, FL 32514

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby 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 annual report or supplemental annual 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 12 or Block 13 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

George B. Krohn

4/5/99

Date

(850) 477-6050

Daytime Phone #

CR2E034 (11/98)