FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

716326 DOCUMENT #

141

1. Corporation TRINITY		(4)					
Principal Place	of Business	Mailing Address				Vall dileta bileta dadah bilata etalit bilata 100a	
1251 \$ W 15TH AVENUE 1251 \$ W 15TH AVENUE BOCA RATON FL 33486 BOCA RATON FL 33486							
					3. Date Incorporated or Qualified 04/07/1969	3a. Date of Last Report 01/26/1995	
2. Principal Pla	ice of Business	2a. Mailing Address 26			4. FEI Number 59-2757774	Applied For Not Applicable	
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	See Required	
City & State		City & State			Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
Zip	Country	Zip	Countr	у	8. This corporation has liability for in	_ • _	
24	9. Name and Address of Current	29 Registered Agent	30		Florida Statutes 10. Name and Address of New Re	Yes No	
	g, Hamb and Address of Carton	Hogistolea Agent	81	Name		grater an Albert	
WATT, RI	CHARD D.		-	W/	ATT, RICHARD D.	- 1	
1251 SW 12TH TERR.			82	Street Add	350 S.W. 12th TERR.		
BOCA RATON FL 33486			83				
			84		A RATON.	FL 85 Zip Code 33486	
11. Pursuant to	o the provisions of Sections 617,0502 and agent, or both, in the State of Florida	and 617.1508, Florida Statute	es, the above	named corpo	ration submits this statement for the purp and of directors. I hereby accept the appo	lose of changing its registered office	
familiar witl	h, and accept the obligations of, Sectio	n 617.0503, Florida Statutes	od by the con	poration a toc	and of directors. Thereby accept the appo	Illinoit as registered agent. Fam	
SIGNATURE _							
12.	Signature, typed or printed name of registered agent at OFFICERS AND		13.	ent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTORS IN 12	
TITLE	PCD	DINECTORS	1.1 TITLE		ADDITIONS/CHANGES TO GITT	Change Addition	
NAME	WATT, RICHARD D.	_	1.2 NAME			-	
STREET ADDRESS	1350 S. W. 12TH TERRACE		1.3 STAES	T ADDRESS			
CITY - S1 - ZIP	BOCA RATON FL 33486		1.4 CITY-	ST-ZIP			
TITLE	VD	□X DELETE	2.1 TITLE		VD	Change 🗶 Addition	
NAME	MEILER, DALE		2.2 NAME		BŪRNS, JIM		
STREET ADDRESS	1905 SW 15TH ST., STE. 6		23 STREE	T ADDRESS	BÜRNS, JIM 1221 N.E. 25th AVE. 1GHTHOUSE POINT, FL. 3306	Ē.	
CITY - ST - ZIP	DEERFIELD BCH. FL		2.4 CITY	-ST-ZIP	LIGHTHOUSE POINT,	FL. 33064	
TITLE	S WALKED VEHINDA	DELETE	31 TITLE			Change Addition	
NAME	WALKER, VELINDA 9452 LAKE SERENA DR.		3 2 NAME				
STREET ADDRESS	BOCA RATON FL 33496			ET ADDRESS			
CITY-ST-ZIP TITLE	TD 33436	DELETE	3.4. CITY 4.1 TITLE	-31-21		Change Addition	
NAME	BRODSKY, LINDA		4. 2 NAM	E			
STREET ADDRESS	18449 SPANISH ISLE CT.		4.3 STREE	ET ADDRESS			
CHTY-ST-ZIP	BOCA RATON FL 33496		4.4 CITY -	ST-ZIP			
TITLE		DELETE	5.1 TITLE			Change Addition	
NAME			5.2 NAME				
STHEET ADDRESS			5.3 STREE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY				
TITLE		DELETE	6.1 TITLE	i		Change Addition	
NAME			6.2 NAME				
STREET ADDRESS				ET ADDRESS			
14. Ldo hereb	v certify that the information supplied w	ith this filing is voluntarily furn	6.4 CITY- ished and do	es not qualify	for the exemption stated in Section 119.0	07/(3)(k). Florida Statutes I further	
certify that oath; that	the information indicated on this an <u>nua</u>	report or supplemental ann ation or the receiver or truste	ual report is t e empowered	rue and accur	ate and that my signature shall have the a nis report as required by Chapter 617, Flo	same legat effect as if made under	

1/26/96 407-392-5433