

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jun 30, 2005
Secretary of State**

DOCUMENT# N04000010708

Entity Name: THE HOLY TRINITY FUND, INC.

Current Principal Place of Business:

4635 S DEL PRADO BLVD
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

4635 S DEL PRADO BLVD
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GENNARO, MICHAEL A
4635 S DEL PRADO BLVD
CAPE CORAL, FL 33904 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: MONACO, WALTER
Address: AUSTEG 6 66862 KINDSBACH
City-St-Zip: GERMANY,

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

Title: D () Delete
Name: MORAS, JEROME
Address: KARMELITSKA 9 11800 PRAHA 1
City-St-Zip: CZEZH REPUBLIC,

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

Title: D () Delete
Name: CABANILLAS, JOSEPH
Address: 252 S REEVES DR APT 9
City-St-Zip: BEVERLY HILLS, CA 90212

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

SIGNATURE: WALTER MONACO

PSD

06/30/2005

Electronic Signature of Signing Officer or Director

Date