2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43420

FILED Jul 03, 2004 Secretary of State

Entity Name: TRI-DISTRICT INTERGROUP, INC.

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

PLAZA BLDG 3300 N. PACE, STE 322 PENSACOLA, FL 32505

Current Mailing Address: New Mailing Address:

PLAZA BLDG 3300 N. PACE, STE 322 PENSACOLA, FL 32505

FEI Number: 59-2914891 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:

HOWARD, JEANNE
3300 NORTH PACE BLVD.
STE 322
PENSACOLA, FL 32505

MARCHESSEAULT, PAUL A
3300 NORTH PACE BLVD.
STE 322
PENSACOLA, FL 32505

MARCHESSEAULT, PAUL A
3300 NORTH PACE BLVD.
STE 322
PENSACOLA, FL 32505

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: PAUL A. MARCHESSEAULT 07/03/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 T
 () Delete
 Title:
 T
 (X) Change () Addition

 Name:
 BERNICKEN, NICOLE5
 Name:
 CHARLETTE, HOOKS

 Address:
 5775 LEESWAY BLVD.
 Address:
 3044 BRIGANTIME DR.

Address. 5775 LEESWAY BLVD. Address. 5044 BRIGANTINE DR. City-St-Zip: PENSACOLA, FL 32504 City-St-Zip: PENSACOLA, FL 32526

Title: D () Delete Title: () Change () Addition
Name: COLLINS, CHRIS Name:
Address: 2841 VIA ROMA CT. Address:

Address: 2841 VIA ROMA CT. Address: City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip:

Title: D3 () Delete Title: D3 (X) Change () Addition Name: PORTER, THOMAS Name: PORTER, THOMAS

 Address:
 7565 NORTH SHORES DR.
 Address:
 4960 HWY 90 # 147

 City-St-Zip:
 NAVARRE, FL 32566
 City-St-Zip:
 PACE, FL 32571

Title: S () Delete Title: () Change () Addition

 Name:
 HARRIS, LINDA
 Name:

 Address:
 3260 TALLSHIP LANE
 Address:

 City-St-Zip:
 PENSACOLA, FL 32526
 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: PAUL A. MARCHESSEAULT RA 07/03/2004