

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 04, 2011  
Secretary of State**

DOCUMENT# N49476

**Entity Name:** TRINITARIA RESIDENCES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

415 N HIBISCUS DR  
#A  
MIAMI BEACH, FL 33139 US

**New Principal Place of Business:**

**Current Mailing Address:**

415 N HIBISCUS DR  
#A  
MIAMI BEACH, FL 33139 US

**New Mailing Address:**

**FEI Number:** 65-0423754      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

EVANS, STEVE J  
415 N HIBISCUS DR  
UNIT A  
MIAMI BEACH, FL 33139 US

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

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: D  
Name: CARNESELLA, CATHRYN  
Address: 415 N HIBISCUS DR  
City-St-Zip: MIAMI BCH, FL 33139

Title: D  
Name: COMPTON, TRAVIS  
Address: 415 N HIBISCUS DR #D  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D  
Name: AROMIN, VICTOR  
Address: 415 N HIBISCUS DR #C  
City-St-Zip: MIAMI BEACH, FL 33139

Title: PSTD  
Name: EVANS, STEVE J  
Address: 415 N HIBISCUS DR #A  
City-St-Zip: MIAMI BCH, 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVE J EVANS

PRES

04/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date