FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 9:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000002770 (6)

1. Corporation Name

TRINITY ACADEMY, INC.

Principal Place of Business	Mailing Address
ST. JAMES THE FISHERMAN EPISCOPAL CHURCH 87500 U.S. HIGHWAY #1 ISLAMORADA FL 33036	ST. JAMES THE FISHERMAN EPISCOPAL CHURCH 87500 U.S. HIGHWAY #1 ISLAMORADA FL 33036

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/21/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0442293 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business (21) / Suite, Apt. #, etc. (22) / City & State (23) / Zip (24) / Country (25)

2a. Mailing Address (26) / Suite, Apt. #, etc. (27) / City & State (28) / Zip (29) / Country (30)

9. Name and Address of Current Registered Agent

MCDOWELL, JOSEPH L
ST. JAMES EPISCOPAL CHURCH
87500 U.S. HIGHWAY #1
ISLAMORAFA FL 33036

10. Name and Address of New Registered Agent

81 Name: Wayne Otto-Fitzdam
82 Street Address (P.O. Box Number is Not Acceptable): 138 Plantation Ave
83
84 City: Tavernier FL 85 Zip Code: 33070

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: Wayne Otto-Fitzdam CPA — 4/25/95
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☑ Change ☐ Addition
NAME	MCDOWELL, JOSEPH L	1.2 NAME	Delete as Director
STREET ADDRESS	124 N. COCONUT PALM BLVD.	1.3 STREET ADDRESS	McDowell, Joseph L
CITY-ST-ZIP	TAVERNIER FL 33070	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	WALSH, ROSANNE	2.2 NAME	
STREET ADDRESS	110 E. SHORE DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	KEY LARGO FL 33037	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	WIGHTMAN, CAROLYN	3.2 NAME	
STREET ADDRESS	115 SOUTH DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	ISLAMORADA FL 33036	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	SHAUGHNESSY, MIMI	4.2 NAME	
STREET ADDRESS	254 MOHAWK STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	TAVERNIER FL 33070	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	OTTO-FITZDAM, WAYNE	5.2 NAME	
STREET ADDRESS	PLANTATION AVENUE	5.3 STREET ADDRESS	
CITY-ST-ZIP	TAVARNIER FL 33070	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☑ Change ☐ Addition
NAME	BENNETT, SUE E	6.2 NAME	Delete as Director
STREET ADDRESS	222 ANTIGUA DRIVE	6.3 STREET ADDRESS	Bennett, Sue E.
CITY-ST-ZIP	TAVERNIERRIVE FL 33070	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Wayne Otto-Fitzdam CPA — 4/25/95 — 3058522834
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0039910