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FILED
Mar 26 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
J. B. Mortham
DIVISION OF CORPORATIONS

DOCUMENT # N94000005537 (5)

1. Corporation Name

TRI-PARISH COUNCIL, INC.



Principal Place of Business

Mailing Address

C/O HOLY TRINITY EPISCOPAL CHURCH
211 TRINITY PLACE
WEST PALM BEACH FL 33401
US

C/O HOLY TRINITY EPISCOPAL CHURCH
221 TRINITY PLACE
WEST PALM BEACH FL 33401

3. Date Incorporated or Qualified

11/04/1994

4. FEI Number

65-0519595

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RANDOLPH, JOHN W
1675 PALM BEACH LAKES BLVD
SUITE 700
WEST PALM BEACH FL 33401

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed 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
NAME FOOT, VIRGINIA W
STREET ADDRESS 638 E. OCEAN AVE.
CITY-ST-ZIP BOYNTON BEACH FL 33435

☐ DELETE

TITLE D
NAME BROWNE, MARY ANITA
STREET ADDRESS 1505 N. MANGONIA DRIVE
CITY-ST-ZIP WEST PALM BEACH FL 33401

☒ DELETE

TITLE D
NAME LEWIS, HOWARTH
STREET ADDRESS 1130 SAND DRIFT WAY
CITY-ST-ZIP WEST PALM BEACH FL 33411

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change

☐ Addition

2.1 TITLE D
2.2 NAME SWEETING, Mary E.
2.3 STREET ADDRESS 5712 Briarwood St.
2.4 CITY-ST-ZIP MANGONIA PARK, 33407

☐ Change

☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

[Signature]

3/5/98

(E) 833.771-8

CR2E037 (10/97)