2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003405

FILED Feb 18, 2012 Secretary of State

Entity Name: TRINITY LAKES FOUNDATION, INC.

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

2 WATERFRONT COURT 28 CIRCLE CREEK WAY

ORMOND BEACH ORMOND BEACH, FL 32174 UN ORMOND BEACH, FL 32174 UN

Current Mailing Address: New Mailing Address:

2 WATERFRONT COURT 28 CIRCLE CREEK WAY

ORMOND BEACH ORMOND BEACH, FL 32174 UN ORMOND BEACH, FL 32174

FEI Number: 59-3452566 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:

GLOVER, PETER M GLOVER, PETER M 2 WATERFRONT COUIRT 28 CIRCLE CREEK WAY

ORMOND BEACH, FL 32174 US US ORMOND BEACH, FL 32174

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: PETER M. GLOVER 02/18/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

GLOVER, PETER M Name: Address: 28 CIRCLE CREEK WAY City-St-Zip: ORMOND BEACH, FL 32174

Title: CD

Name: BLACK, HARRY H Address: 27 BROOK CREST WAY City-St-Zip: ORMOND BEACH, FL 32174

Title: DS

SMITH, DANA Name:

Address: 5 ARCHANGEL CIRCLE City-St-Zip: ORMOND BEACH, FL 32174

Title:

Name: LAMM, JEFF

4 SUGAR MILL LANE SOUTH Address: City-St-Zip: FLAGLER BEACH, FL 32136

Title:

JOHNSON, ROBERT L Name: 200 SOUTH RIDGEWOOD AVE. Address: City-St-Zip: DAYTONA BEACH,, FL 32114

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: PETER M. GLOVER DT 02/18/2012