Po 3 000007561

(Re	questor's Name)	
TRINITY HAI	RBOR CORP	ORATION –
10 PARADISE DRIVE L	ACONIA, NEW HAMPSI	HIRE 03246
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
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TRANSMITTAL LETTER

SUBJECT: TRINITY HARBOR CORPORATION (Name of corporation) DOCUMENT NUMBER: PO 300000 756 1			
DOCUMENT NUMBER: 1030000 /561			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
BERNICE PARADISE (Name of person)			
TRINITY HARBOR CORPORATION (Name of firm/company)			
P. O. Box 5504 (Address)			
(Address)			
SPRING HILL, FLORIDA 34611-5504 (City/state and zip code)			
For further information concerning this matter, please call:			
BERNICE PARADISE at (352) 688-0309 (Name of person) (Area code & daytime telephone number)			
Enclosed is a \$35.00 check made payable to the Department of State.			

P.S. CORPANSERICA HAS BEEN INSTRUCTED TO PROVIDE INFORE OFFICERS & DIRECTORS AS ORDERED WHEN WE CONTRACTED WITH THEM TOFORM THE COMPANY.

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of
FLORIDA in order to change its registered office or registered agent, or both, in the State
of Florida. 1. The name of the corporation: TRINITY HARBOR CORPORATION
2. The principal office address: 7245 FOREST OAKS BOULEVARD
SPRING HILL FLORIDA 34606
3. The mailing address (if different): P. O. BOX 5504
SPRING HILL, FLORIDA 34611-5504
4. Date of incorporation/qualification: 1/21/03 Document number: P03000007561
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
LEXIS NEXIS DOCUMENT SOLUTIONS INC
3953 W. W. KELLEY ROAD
TALLAHASSEE, FLORIDA 32311
6. The name and street address of the new registered agent (if changed) and /or registered office (if
changed): BERNICE J. PARADISE
7245 FOREST OAKS BOULEVARD (P.O. Box or personal mailbox NOT acceptable)
SPRING HILL FLORIBA 34606
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Bernice O. Paraduce (Signature of an officer, enginman or vice chairman of the board) BERNICE J. PARADISE, PRES. (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Bernie Parelisi MARCH 5 2003 Em &
If signing on behalf of an entity:
Clymad or British Marray
* * * FILING FRE • \$35.00 * * *
Make Checks Payable to Florida Department of State and Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314