

## **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000121608

**Entity Name:** TRIDENT PROVISION & SUPPLY, INC.

**FILED**  
**May 25, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

PO BOX 350233  
JACKSONVILLE, FL 32235

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 350233  
JACKSONVILLE, FL 32235

**New Mailing Address:**

**FEI Number:** 20-1535836

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KURLIN, KENNETH  
54128 LISA DRIVE  
CALLAHAN, FL 32011 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: DP ( ) Delete  
Name: BEGGS, MICHAEL  
Address: 289 LAZY MEADOW DR W  
City-St-Zip: JACKSONVILLE, FL 32225

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: KURLIN, KENNETH  
Address: 54128 LISA DRIVE  
City-St-Zip: CALLAHAN, FL 32011

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH KURLIN

DP

05/25/2005

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

\_\_\_\_\_  
Date