

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16046

FILED  
Jan 18, 2010  
Secretary of State

Entity Name: TRIVEST PLAN SPONSOR, INC.

## Current Principal Place of Business:

550 SOUTH DIXIE HIGHWAY  
SUITE 300  
CORAL GABLES, FL 33146 US

## New Principal Place of Business:

## Current Mailing Address:

550 SOUTH DIXIE HIGHWAY  
SUITE 300  
CORAL GABLES, FL 33146 US

## New Mailing Address:

FEI Number: 65-0006158      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GERSHMAN, DAVID  
550 SOUTH DIXIE HIGHWAY  
SUITE 300  
CORAL GABLES, FL 33146 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D  
Name: POWELL, EARL W  
Address: 550 SOUTH DIXIE HIGHWAY, SUITE 300  
City-St-Zip: CORAL GABLES, FL 33146 US

Title: PCEO  
Name: TEMPLETON, TROY D  
Address: 550 SOUTH DIXIE HIGHWAY, SUITE 300  
City-St-Zip: CORAL GABLES, FL 33146 US

Title: CFO  
Name: MORAN, RICHARD H  
Address: 550 SOUTH DIXIE HIGHWAY, SUITE 300  
City-St-Zip: CORAL GABLES, FL 33146 US

Title: SGC  
Name: GERSHMAN, DAVID  
Address: 550 SOUTH DIXIE HIGHWAY, SUITE 300  
City-St-Zip: CORAL GABLES, FL 33146 US

Title: VPAS  
Name: BAKER, LINDA E  
Address: 550 SOUTH DIXIE HIGHWAY, SUITE 300  
City-St-Zip: CORAL GABLES, FL 33146 US

Title: AS  
Name: DENNIS, PHYLLIS G  
Address: 550 SOUTH DIXIE HIGHWAY, SUITE 300  
City-St-Zip: CORAL GABLES, FL 33146 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PHYLLIS G. DENNIS

AS

01/18/2010

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

\_\_\_\_\_  
Date