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Apr 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1997/1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000007706 (2)

1. Corporation Name
TRINITY MANAGEMENT CORPORATION

Principal Place of Business	Mailing Address
8375 DIX ELLIS TRAIL, STE 104 JACKSONVILLE FL 32256	8375 DIX ELLIS TRAIL, STE 104 JACKSONVILLE FL 32256-8281

3. Date Incorporated or Qualified: 01/21/1994
3a. Date of Last Report: 12/26/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 59-3218946 — Applied For / Not Applicable

5. Certificate of Status Desired: X — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ENOCKS, SANDRA L ENOCHS
8375 DIX ELLIS TRAIL, STE 104
JACKSONVILLE FL 32256

10. Name and Address of New Registered Agent

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 607.0502 and 607.1005, 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 607.0505, Florida Statutes.

SIGNATURE
Signature of new registered agent and date of signature — (DATE: Registered Agent's signature required when reinstating) — Date

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 13	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP BEELER, PARK L 8375 DIX ELLIS TRAIL, STE 104 JACKSONVILLE FL 32256	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV COOK, JOHN E 8375 DIX ELLIS TRAIL, STE 104 JACKSONVILLE FL 32256	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS ENOCKS, SANDRA L ENOCHS 8375 DIX ELLIS TRAIL, STE 104 JACKSONVILLE FL 32256	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

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14. I do 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 authorize the Department of State to correct any name or address 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; that the Department of State to correct any name or address appears in Block 12 or Block 13 if changed, or on an attached sheet with an address

SIGNATURE: SANDRA L. ENOCHS — 4/22/98 — (904) 363-1384