FILED

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME

Mar 28, 2002 8:00 am § P97000085432 DOCUMENT # **Secretary of State** 1. Entity Name 03-28-2002 90157 043 ***150.00 TRINITY GROUP INVESTMENTS, INC. Principal Place of Business Mailing Address P.O. BOX 9 789 N FERDON BLVD SUITE 11 CRESTVIEW FL 32536 CRESTVIEW FL 32536 2. Principal Place of Business 3. Mailing Address 5170 Ferdon Blud South DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3510121 FLAZE CRCS Crestice Not Applicable \$8.75 Additional 5. Certificate of Status Desired 325 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Pau WELTON & WILLIAMSON, PA Street Address (P.O. Box Number is Not 1020 FERDON BLVD. SOUTH CRESTVIEW FL 32536 Zip Code 32536 8. 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back). Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition TITLE TITLE ☐ Delete <u>6</u> KELLEY, PAUL TIM NAME NAME 5170 Feddon Alud South CR2E034 STREET ADDRESS 5170 FEROON BLVD SOUTH STREET ADDRESS CRESTVIEW FL 32536 CITY-ST-7IP CITY-ST-78P President cless, steve 101 Janes Lee Blud Cresty'en FL TITLE ☐ Delete TITLE 2 Change Addition NAME CLEGG, STEVE NAME STREET ADDRES 101-JAMES LEE BLVD-STREET ADDRESS CRESTVIEW FL 32536 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition SUMMERLIN, JERRY NAME NAME STREET ADDRESS P Q BOX 8 STREET ADDRESS CITY-ST-ZIP HOLT N_L32564 CITY-ST-ZIP ☐ Delete TITLE ☐ Addition TITLE JOHNSON, JANET NAME NAME 1020 FERDON BLVD. SOUTH STREET ADDRESS STREET ADDRESS CRESTMEW FL 32536 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I 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 report or supplemental report is true and accurate and that my 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 in Block 12 if changed, or on an attachment with an address, with all of Parks empowered.