

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000004713

Entity Name: TRIDENT MANAGEMENT CORP.

FILED  
Apr 16, 2002 8:00 AM  
Secretary of State

**Current Principal Place of Business:**

1790 SOUTHWEST 13TH COURT  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

1790 SOUTHWEST 13TH COURT  
POMPANO BEACH, FL 33069

**New Mailing Address:**

FEI Number: 65-0810948      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SULLIVAN, ROBERT S  
1790 SW 13TH CT  
POMPANO BCH, FL 33069

**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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SULLIVAN, ROBERT S  
Address: 2810 NE 29TH ST  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: VS ( ) Delete  
Name: BATZER, BRYCE N  
Address: 6295 SW 6TH STREET NE 31  
City-St-Zip: POMPANO BEACH, FL 33060

Title: VT ( ) Delete  
Name: AVERY, JEFFREY A  
Address: 7200 SW 5TH ST  
City-St-Zip: PLANTATION, FL 33317

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: ROBERT S. SULLIVAN

P

04/16/2002

Electronic Signature of Signing Officer or Director

Date