

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000033237
 1. Entity Name
 TRINITY GROUP OF SOUTHWEST FLORIDA, INC.



Principal Place of Business
 435 TREMINGHAM WAY
 VENICE, FL 34293

Mailing Address
 435 TREMINGHAM WAY
 VENICE, FL 34293

DO NOT WRITE IN THIS SPACE



04142004 No Chg-P CR2E034 (10/03)

4. FEI Number
 65-0953500 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SAHROW, THOMAS H
 435 TREMINGHAM WAY
 VENICE, FL 34293

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTD SAHROW, THOMAS H 435 TREMINGHAM WAY VENICE, FL 34293
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSD SAHROW, KATHLEEN D 435 TREMINGHAM WAY VENICE, FL 34293
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 04/20/04-80020-009 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] T. H. ...
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/14/04 Daytime Phone #: 941-462-5825