

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996



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

FILED

96 DEC 26 AM 9:28

DOCUMENT # V53136 (0)

1. Corporation Name
 TRINITY PARTNERS, INC.

SECRETARY OF STATE
 TALLAHASSEE FLORIDA



REINSTATEMENT *Plow*

Principal Place of Business Mailing Address
 8375 DIX ELLIS TRAIL SUITE 104 JACKSONVILLE FL 32256
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3. Date Incorporated or Qualified 07/24/1992
 3a. Date of Last Report 08/15/1995
 4. FEI Number 59-3198039 Applied For Not Applicable
 5. Certificate of Status Desired \$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

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

9. Name and Address of Current Registered Agent
 COOK, JOHN E
 8375 DIX ELLIS TRAIL SUITE 107 JACKSONVILLE FL 32256

10. Name and Address of New Registered Agent
 81 Name SANDRA L. ENCKS
 82 Street Address (P.O. Box Number is Not Acceptable) 8375 DIX ELLIS TRAIL, STE. 104
 83
 84 City JACKSONVILLE FL 85 Zip Code 32256

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 *Sandra L. Encks* 12/23/96
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when constituting) DATE

12. OFFICERS AND DIRECTORS
 TITLE DVS DELETE
 NAME COOK, JOHN E
 STREET ADDRESS 8375 DIX ELLIS TRAIL, SUITE 107
 CITY-ST-ZIP JACKSONVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 1.1 TITLE Change Addition
 1.2 NAME D/P BEELER, PARK L.
 1.3 STREET ADDRESS 8375 DIX ELLIS TRAIL, STE. 104
 1.4 CITY-ST-ZIP JACKSONVILLE, FL 32256
 2.1 TITLE Change Addition
 2.2 NAME D/V COOK, JOHN E.
 2.3 STREET ADDRESS 8375 DIX ELLIS TRAIL, STE. 104
 2.4 CITY-ST-ZIP JACKSONVILLE, FL 32256
 3.1 TITLE Change Addition
 3.2 NAME D/V W. PAUL MOSELEY
 3.3 STREET ADDRESS 8375 DIX ELLIS TRAIL, STE. 104
 3.4 CITY-ST-ZIP JACKSONVILLE, FL 32256
 4.1 TITLE Change Addition
 4.2 NAME ENCKS, SANDRA L.
 4.3 STREET ADDRESS 8375 DIX ELLIS TRAIL, STE. 104
 4.4 CITY-ST-ZIP JACKSONVILLE, FL 32256
 5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS 300002039633--6
 5.4 CITY-ST-ZIP -12/27/96--01079--007
 6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Sandra L. Encks* SANDRA L. ENCKS 12/16/96 (904) 368-1384
 Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (3/96)