

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03962

**Entity Name:** TRIO ENGLEWOOD, INC.

**Current Principal Place of Business:**

2767 NORTH BEACH ROAD  
#208  
ENGLEWOOD, FL 34223-9119

**Current Mailing Address:**

2767 NORTH BEACH ROAD  
#208  
ENGLEWOOD, FL 34223-9119

**FEI Number:** 59-2029154

**Certificate of Status Desired:** No

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

DEJONGE, CORA  
2767 N BEACH ROAD  
# 208  
ENGLEWOOD, FL 34223 US

*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

**Officer/Director Detail :**

Title V  
Name DE JONGE, G  
Address 2767 N BEACH RD #208  
City-State-Zip: ENGLEWOOD FL 34223

Title P  
Name DE JONGE, L  
Address 2767 N BEACH RD #208  
City-State-Zip: ENGLEWOOD FL 34223

Title ST  
Name DE JONGE, C  
Address 2767 N BEACH ROAD, #208  
City-State-Zip: ENGLEWOOD, FL FL 34223

*I hereby 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 all other like empowered.*

**SIGNATURE:** CORA DE JONGE

**SECRETARY**

**02/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date