

# 2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

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DOCUMENT # **A01000000316**

1. Entity Name  
**TRINITY INVESTORS, LTD.**

02 JUN -3 AM 11:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**936 CRENSHAW LAKE ROAD  
LUTZ FL 33549**

Mailing Address  
**936 CRENSHAW LAKE ROAD  
LUTZ FL 33549**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

**DUE BY MAY 1, 2002**

City & State

City & State

4. FEI Number  
**59-3731714**

Applied For  
 Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WIECZORKOWSKI, ANDREW ESQUIRE  
THE WILDER CENTER  
3000 GULF-TO-BAY BLVD., SUITE 200  
CLEARWATER FL 33759**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record: **\$1,500,000.00**

10. Amount of Capital Contributions in FLORIDA to date: **0**

11. **MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT #	<b>L01000003375</b>
NAME	<b>WEISBAR INVESTMENTS, L.L.C.</b>
STREET ADDRESS	<b>936 CRENSHAW LAKE ROAD</b>
CITY-ST-ZIP	<b>LUTZ FL 33549</b>
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	<b>900005729239--4</b>
CITY-ST-ZIP	<b>-06/10/02--01081--006</b> <b>****141-25****141-25</b>
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

CR2E003 (9/01)

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: **Kaspran** Date: **Apr 29/02** (813) 380-6333

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER