

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000099689

**Entity Name:** TRINITY TRADING GROUP LLC**Current Principal Place of Business:**10014 SHORTWOOD LANE  
ORLANDO, FL 32836**Current Mailing Address:**10014 SHORTWOOD LANE  
ORLANDO, FL 32836 US**FEI Number:** 46-0703570**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHOCK, BRUCE R  
10014 SHORTWOOD LANE  
ORLANDO, FL 32836 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

**Authorized Person(s) Detail :**

Title MGR  
Name SCHOCK, BRUCE R  
Address 10014 SHORTWOOD LANE  
City-State-Zip: ORLANDO FL 32836

Title AUTHORIZED MEMBER  
Name RHOWE INVESTMENT GROUP, LLC  
Address 713 LITTLE WEKIVA RD  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title AUTHORIZED MEMBER  
Name CERNIGLIA, EMILY V.  
Address 10014 SHORTWOOD LANE  
City-State-Zip: ORLANDO FL 32836

Title AUTHORIZED MEMBER  
Name HOLECHEK, RHETT  
Address 7321 N. 153RD STREET  
City-State-Zip: BENNINGTON NE 68007

Title AUTHORIZED MEMBER  
Name SRT FAMILY, LLC  
Address 32 CANTERBURY BELL DRIVE  
City-State-Zip: OVIEDO FL 32765

Title AUTHORIZED MEMBER  
Name TRIAD CURRENCY LLC  
Address 1600 GREEN CRICKET CT.  
City-State-Zip: APOPKA FL 32712

Title AUTHORIZED MEMBER  
Name CARLOW, ELIZABETH A.  
Address 10014 SHORTWOOD LANE  
City-State-Zip: ORLANDO FL 32836

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BRUCE R. SCHOCK**PRESIDENT & CEO****04/19/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date