

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 592881

FILED
Jan 04, 2005
Secretary of State

Entity Name: TRI-VENTURE MARKETING, INC.

Current Principal Place of Business:

2525 DRANE FIELD RD STE 1
SUITE #1
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

2525 DRANE FIELD RD STE 1
SUITE #1
LAKELAND, FL 33811

New Mailing Address:

FEI Number: 59-1861887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEAN, JOHN J JR
9418 WICHHAM WAY
ORLANDO, FL 32836 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DEAN, MARY M
Address: 112 STRAFFORD DR.
City-St-Zip: LOUISBURG, NC 27549

Title: D () Delete
Name: DEAN, JOHN J III
Address: 112 STRAFFORD DR.
City-St-Zip: LOUISBURG, NC 27549

Title: VP () Delete
Name: ANGLIN, FRANK D.,
Address: 1528 HANSON AVE.
City-St-Zip: LAKELAND, FL

Title: VP () Delete
Name: TALLANT, JOHN
Address: 1990 HUGHS DR
City-St-Zip: CUMMING, GA 30040

Title: CEOD () Delete
Name: DEAN, JOHN JACKSON JR
Address: 9418 WICHHAM WAY
City-St-Zip: ORLANDO, FL 32836

Title: V () Delete
Name: TEASDALE, WALT
Address: 6507 STAFFORD TERRACE
City-St-Zip: PLANT CITY, FL 33566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARY R THORN

COMP

01/04/2005

Electronic Signature of Signing Officer or Director

Date