

**2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2007**

FILED
Apr 13, 2007 08:00 A
Secretary of State

| | | | |
|--|---------|---|---------|
| DOCUMENT # A01000000316 1. Entity Name TRINITY INVESTORS, LTD. | |  | |
| Principal Place of Business 936 CRENSHAW LAKE ROAD LUTZ FL 33549 | | | |
| 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. | | 3. Mailing Address Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |



1st MOORE CR2E003 (10/06)

| | |
|-----------------------------|-------------------------------|
| 4. FEI Number 59-3731714 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

| | |
|---|--------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|---|--------------------------------|

| | | | |
|---|--|--|--|
| 6. Name and Address of Current Registered Agent WIECZORKOWSKI, ANDREW ESQUIRE THE WILDER CENTER 3000 GULF-TO-BAY BLVD., SUITE 200 CLEARWATER FL 33759 | | 7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! Fee is \$500. * After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.**

**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 # NAME STREET ADDRESS CITY- ST- ZIP | L01000003375 WEISBAR INVESTMENTS, L.L.C. 936 CRENSHAW LAKE ROAD LUTZ FL 33549 | STREET ADDRESS | |
| DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP | | CITY- ST- ZIP | |
| DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP | | STREET ADDRESS | |
| DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP | | CITY- ST- ZIP | |
| DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP | | STREET ADDRESS | |
| DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP | | CITY- ST- ZIP | |
| DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP | | STREET ADDRESS | |
| DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP | | CITY- ST- ZIP | |
| DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP | | STREET ADDRESS | |
| DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP | | CITY- ST- ZIP | |

000000706192
04/24/07-80024-010 500.00

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *B. Kasprun* **4/10/07** **8133806101**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #