

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004944

FILED
Jan 17, 2006
Secretary of State

Entity Name: TRINITY MORTGAGE OF MINNESOTA INC.

Current Principal Place of Business:

20 NORTH LAKE STREET
SUITE 312
FOREST LAKE, MN 55025

New Principal Place of Business:

Current Mailing Address:

20 NORTH LAKE STREET
SUITE 312
FOREST LAKE, MN 55025

New Mailing Address:

FEI Number: 75-3112540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEHNER, ROBERT
109 WEST PAGO PAGO DRIVE
NAPLES, FL 34113 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: P () Delete
Name: SCHWAB, RANDIL
Address: 14580 GENEVA AVE. NO
City-St-Zip: HUGO, MN 55038

Title: VP () Delete
Name: LYSFORD, SCOTT
Address: 1137 NORTH SHORE DRIVE
City-St-Zip: DETROIT LAKES, MN 56501

Title: S () Delete
Name: TEMPLETON, MARK
Address: 1130 15TH STREET SE
City-St-Zip: FOREST LAKE, MN 55025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LYSFORD, SCOTT
Address: 1137 NORTH SHORE DRIVE
City-St-Zip: DETROIT LAKES, MN 56501

Title: VP (X) Change () Addition
Name: SCHWAB, RANDIE
Address: 14580 GENEVA AVE NO
City-St-Zip: HUGO, MN 55038

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 Chapter 119, 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: SCOTT LYSFORD

P

01/17/2006

Electronic Signature of Signing Officer or Director

Date