

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F94000003588 (0)**

1. Corporation Name

TRINITY EQUIPMENT FINANCE, INC.

Principal Place of Business

**475 SANSOME ST., 19TH FLOOR
SAN FRANCISCO CA 94111**

Mailing Address

**475 SANSOME ST., 19TH FLOOR
SAN FRANCISCO CA 94111**



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

3. Date Incorporated or Qualified

07/08/1994

3a. Date of Last Report

03/21/1995

4. FEI Number

94-2719467

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81

Name

82

Street Address (P.O. Box Number is Not Acceptable)

83

84

City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of the Registered Agent or the Corporation)

(Signature of Registered Agent or the Corporation)

(Date)

12. OFFICERS AND DIRECTORS

1. TITLE

DP

☐ DELETE

NAME

HALOW, JAMES

STREET ADDRESS

250 ALHAMBRA ST.

CITY, ST, ZIP

SAN FRANCISCO CA 94123

1. TITLE

DV

☐ DELETE

NAME

HALOW, DONNA

STREET ADDRESS

250 ALHAMBRA ST.

CITY, ST, ZIP

SAN FRANCISCO CA 94123

1. TITLE

V

☐ DELETE

NAME

GUERTIN, ROGER

STREET ADDRESS

36580 POLVORUSA CT.

CITY, ST, ZIP

FREMONT CA 94536

1. TITLE

V

☐ DELETE

NAME

CARLILE, BEN

STREET ADDRESS

314 FAIR OAKS ST.

CITY, ST, ZIP

SAN FRANCISCO CA 94110

1. TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

1. TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

18710 CANYON RD

SONOMA

CA

95476

1.4 CITY, ST, ZIP

☒ Change

☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

18710 CANYON RD

SONOMA

CA

95476

2.4 CITY, ST, ZIP

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 19.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE:

ROGER GUERTIN VP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/96 (415)KSL-S174

CR2E034 (12/95)