

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000020924

FILED
Jul 14, 2006
Secretary of State

Entity Name: TRINITY MORTGAGE COMPANY OF CENTRAL FLORIDA, LLC

Current Principal Place of Business:

238 N. WESTMONTE DRIVE
SUITE 285
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

930 WILLISTON PARK POINT
LAKE MARY, FL 32746

Current Mailing Address:

238 N. WESTMONTE DRIVE
SUITE 285
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

930 WILLISTON PARK POINT
LAKE MARY, FL 32746

FEI Number: 20-0878755 **FEI Number Applied For** () **FEI Number Not Applicable** () **Certificate of Status Desired** ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GRITTER, JACK E
101 CASPIAN COVE
SANFORD, FL 32773 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WELLS, MICHELE
Address: 2755 FAWN LAKE BLVD.
City-St-Zip: MIMS, FL 32754 US

ADDITIONS/CHANGES:

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 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 608, Florida Statutes.

SIGNATURE: MICHELE WELLS

MRS

07/14/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date