2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# L08000055962

Entity Name: TRINITY MORTGAGE FUNDING, LLC

Current Principal Place of Business:

1502 W. FLETCHER AVENUE, STE. 113
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

1502 W. FLETCHER AVENUE, STE. 113
TAMPA, FL 33612

New Mailing Address:

FEI Number: 26-2938366 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WILKES, GEOFFREY G
1502 W. FLETCHER AVENUE, STE. 113
TAMPA, FL 33612 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: MGRM ( ) Delete
Name: WILKES, GEOFFREY G
Address: 10910 SHELDON RD
City-St-Zip: TAMPA, FL 33626

Title: MGR ( ) Delete
Name: WILKES, GEOFFREY G
Address: 10910 SHELDON RD
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: WILKES, GEOFFREY G
Address: 1502 W. FLETCHER AVE. STE 113
City-St-Zip: TAMPA, FL 33612

Title: MGR (X) Change ( ) Addition
Name: WILKES, GEOFFREY G
Address: 1502 W. FLETCHER AVE. STE 113
City-St-Zip: TAMPA, FL 33612

I hereby certify that the information supplied with this filing does not qualify 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: GEOFFREY G. WILKES MGRM 04/29/2009

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