

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000015301

FILED
Apr 29, 2005
Secretary of State

Entity Name: TRINITY FINANCIAL SERVICES, INC.

Current Principal Place of Business:

108 N MAGNOLIA AVE #207
OCALA, FL 34470

New Principal Place of Business:

1515 NW 22TH AVE
OCALA, FL 34470

Current Mailing Address:

P.O. BOX 794
OCALA, FL 34478

New Mailing Address:

P O BOX 1114
TAVARES, FL 32778

FEI Number: 59-3623755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOFFEL, RENEE
810 N NEW HAMPHIRE AVE
TAVARES, FL 32778 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: DPS () Delete
Name: ALBRITTON, TINA
Address: P.O. BOX 794
City-St-Zip: Ocala, FL 34478

Title: V () Delete
Name: PERRY, REGINA
Address: 7575 WEST HIGHWAY 326
City-St-Zip: Ocala, FL 34482

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: PERRY, REGINA
Address: P O BOX 794
City-St-Zip: Ocala, FL 34478

Title: ST () Change (X) Addition
Name: ALBRITTON, TINA
Address: 7575 WEST HWY 326
City-St-Zip: Ocala, FL 34482

Title: TD () Change (X) Addition
Name: ALBRITTON, CHRISTOPHER
Address: 7575 WEST HWY
City-St-Zip: Ocala, FL 34482

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TINA ALBRITTON

PR

04/29/2005

Electronic Signature of Signing Officer or Director

Date