

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000116910

FILED  
Apr 22, 2008  
Secretary of State

Entity Name: TRINITRUST CORPORATION

## Current Principal Place of Business:

901 VENETIA BAY BLVD.  
SUITE 350  
VENICE, FL 34285

## New Principal Place of Business:

## Current Mailing Address:

901 VENETIA BAY BLVD.  
SUITE 350  
VENICE, FL 34285

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLORIDA INCORPORATORS, INC.  
8875 HIDDEN RIVER PARKWAY  
SUITE 300  
TAMPA, FL 336372087 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: D ( ) Delete  
Name: ZOLLERS, JEREMY  
Address: 469 YACHT HARBOR DR.  
City-St-Zip: OSPREY, FL 34229

Title: D ( ) Delete  
Name: ZOLLERS, TIMOTHY  
Address: 1739 PHEASANR RUN PLACE  
City-St-Zip: GENEVA, IL 60134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: JEREMY ZOLLERS

D

04/22/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date