

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P39698

FILED
Aug 08, 2004
Secretary of State

Entity Name: TRIVERSITY CORPORATION

Current Principal Place of Business:

311 SINCLAIR ST
BRISTOL, PA 19007

New Principal Place of Business:

Current Mailing Address:

311 SINCLAIR ST
BRISTOL, PA 19007

New Mailing Address:

FEI Number: 23-2329088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1261 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMAS, DAVID
Address: 311 SINCLAIR ST
City-St-Zip: BRISTOL, PA 19007

Title: TS () Delete
Name: AUUSLANDER, JOSHUA
Address: 311 SINCLAIR ST
City-St-Zip: BRISTOL, PA 19007

Title: T () Delete
Name: THOMAS, DAVID
Address: 311 SINCLAIR ST
City-St-Zip: BRISTOL, PA 19007

Title: D () Delete
Name: THOMAS, DAVID
Address: 311 SINCLAIR ST
City-St-Zip: BRISTOL, PA 19007

Title: D () Delete
Name: PISANO, JOSEPH
Address: 311 SINCLAIR ST
City-St-Zip: BRISTOL, PA 19007

Title: D (X) Delete
Name: WOLF, PETER
Address: 311 SINCLAIR ST
City-St-Zip: BRISTOL, PA 19007

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: THOMAS, DAVID
Address: 311 SINCLAIR ST
City-St-Zip: BRISTOL, PA 19007

Title: D (X) Change () Addition
Name: AMICO, ROBERT
Address: 311 SINCLAIR ST
City-St-Zip: BRISTOL, PA 19007

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 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: JOSHUA AUSLANDER

TS

08/08/2004

Electronic Signature of Signing Officer or Director

Date