

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000024034

Entity Name: TRI-NET MARKETING, INC.

FILED  
Jan 21, 2008  
Secretary of State

**Current Principal Place of Business:**

4023 NW 34 PLACE  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

**Current Mailing Address:**

4023 NW 34 PLACE  
GAINESVILLE, FL 32606

**New Mailing Address:**

FEI Number: 59-3233684      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCHNEIDER, GARY B  
4437 SW 91ST DRIVE  
GAINESVILLE, FL 32608 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: P ( ) Delete  
Name: SCHNEIDER, GARY B  
Address: 4437 SW 91ST DRIVE  
City-St-Zip: GAINESVILLE, FL 32608

Title: T ( ) Delete  
Name: SCHNEIDER, NANA  
Address: 3085 LA RESERVE DRIVE  
City-St-Zip: GAINESVILLE, FL 32082

**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: GARY SCHNEIDER

P

01/21/2008

Electronic Signature of Signing Officer or Director

Date