2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000051410

Entity Name: TRINITY LEASING AND VENTURES, INC.

FILED Feb 01, 2011 Secretary of State

5249 TAMPA WEST BLVD TAMPA, FL 33634 US FEI Number: 59-3244691 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RENTZ, JOEL D 3609 CINNAMON TRACE DRIVE VALRICO, FL 33596 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida.	Current Principal Place of Business:		New Principal Place of Business:		
5249 TAMPA WEST BLVD TAMPA, FL 33634 US FEI Number: 59-3244691 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RENTZ, JOEL D 3609 CINNAMON TRACE DRIVE VALRICO, FL 33596 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida.					
TAMPA, FL 33634 US FEI Number: 59-3244691 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RENTZ, JOEL D 3609 CINNAMON TRACE DRIVE VALRICO, FL 33596 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida.	Current Mailing Address:		New Mailing Address:		
RENTZ, JOEL D 3609 CINNAMON TRACE DRIVE VALRICO, FL 33596 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida.	FEI Number: 59-3244691	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
3609 CINNAMON TRACE DRIVE VALRICO, FL 33596 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida.	Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
in the State of Florida.	3609 CINNAMON TRAC				
SIGNATURE:		submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
	SIGNATURE:				
Electronic Signature of Registered Agent Date	Electro	onic Signature of Registered Age	ent	Date	

OFFICERS AND DIRECTORS:

Title:

Name: RENTZ, JOEL

Address: 3609 CINNAMON TRACE City-St-Zip: VALRICO, FL 33596

I hereby 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 all other like empowered.

SIGNATURE: JOEL RENTZ D 02/01/2011