

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000059478

Entity Name: TRINITY CONCEPTS, INC.

FILED
Feb 22, 2005
Secretary of State

Current Principal Place of Business:

19429 MINNIE FLORA DR
CLERMONT, FL 34711

New Principal Place of Business:

19429 MINNIE FLORA DR
CLERMONT, FL 34715

Current Mailing Address:

19429 MINNIE FLORA DR
CLERMONT, FL 34711

New Mailing Address:

19429 MINNIE FLORA DR
CLERMONT, FL 34715

FEI Number: 59-3532949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, WILLIAM H
19429 MINNIE FLORA DR
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

GREEN, WILLIAM H
19429 MINNIE FLORA DR
CLERMONT, FL 34715 US

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:

02/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GREEN, WILLIAM H
Address: 19429 MINNIE FLORA DR
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: SARRICCHIO, VINCENT S
Address: 4203 HAMMERSMITH DR
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: SANTANA, MANUEL
Address: 5471 LAKE LECLARE RD
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GREEN, WILLIAM H
Address: 19429 MINNIE FLORA DR
City-St-Zip: CLERMONT, FL 34715

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: WILLIAM H. GREEN

D

02/22/2005

Electronic Signature of Signing Officer or Director

Date