2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# P06000148800

Entity Name: RESMEDIN NUTRACEUTICALS CORPORATION

Current Principal Place of Business:

15 PARADISE PLAZA #277
277
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

15 PARADISE PLAZA #277
277
SARASOTA, FL 34239

New Mailing Address:

FEI Number: 20-5963315 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAFRANCE, DAVID A
569 COMMONWEALTH LANE
SARASOTA, FL 34242 US

Name and Address of New Registered Agent:

LAFRANCE, DAVID A
15 PARADISE PLAZA
#277
SARASOTA, FL 34239 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: 04/17/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: LAFRANCE, DAVID A
Address: 569 COMMONWEALTH LANE
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: LAFRANCE, DAVID A
Address: 5445 SABAL TRACE DR
City-St-Zip: NORTH PORT, FL 34287

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: DAVID A. LAFRANCE PRES 04/17/2009
Electronic Signature of Signing Officer or Director Date