## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 563488**

FILED Jan 08, 2009 Secretary of State

Entity Name: THE ROYAL MERCANTILE TRUST CORPORATION OF AMERICA, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	RAL PARKW	AY		
JITE 200 ΓUART,	) FL 34994	US		
urrent M	lailing Addı	ess:	New Mailing Addres	ss:
CENTR	RAL PARKW	AY		
JITE 200 FUART,	) FL 34994	US		
,	: 59-1818710	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	l Address o	f Current Registered Agent:	Name and Address of	of New Registered Agent:
UART,	) FL 34994 L	IS		
UART, e above the State	FL 34994 U named entite of Florida. RE:			ed office or registered agent, or both Date
UART, e above the State GNATUF	FL 34994 Lenamed entite of Florida.  RE: Electr	ry submits this statement for the		ed office or registered agent, or both  Date
ne above the State GNATUF	FL 34994 Lenamed entite of Florida.  RE: Electr	ry submits this statement for the ronic Signature of Registered Ag	ent	
TUART, the above the State GNATUF	FL 34994 Le named entite of Florida.  RE:	ry submits this statement for the provided sing trust fund Contribution ( ).  ECTORS:  ( ) Delete  KENNETH  PKWY SUITE 200	ent	Date
TUART, le above the State GNATUF ection Car FFICERS le: me: dress:	FL 34994 Le named entite of Florida.  RE: Electrompaign Finance  S AND DIRE  PD  KUCHLER, K 10 CENTRAL  STUART, FL  STD  MASON, LOI	ronic Signature of Registered Ageing Trust Fund Contribution ( ).  ECTORS:  ( ) Delete (ENNETH - PKWY SUITE 200  ( ) Delete RETTA - PKWY SUITE 200	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

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: LORETTA MASON ST 01/08/2009