

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006403

FILED
Apr 05, 2007
Secretary of State

Entity Name: VITALTRUST BUSINESS DEVELOPMENT CORPORATION

Current Principal Place of Business:

3000 BAYPORT DR., #910
TAMPA, FL 33607

New Principal Place of Business:

2701 N. ROCKY POINT DR.
#325
TAMPA, FL 33607

Current Mailing Address:

3000 BAYPORT DR., #910
TAMPA, FL 33607

New Mailing Address:

2701 N ROCKY POINT DR.
#325
TAMPA, FL 33607

FEI Number: 88-0503197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROES, CHARLES
910 BAYPORT DR., #910
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

BROES, CHARLES
2701 N ROCKY POINT DR.
#325
TAMPA, FL 33607 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:

04/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCS () Delete
Name: BROES, CHARLES
Address: 7029 PELICAN ISLAND DR.
City-St-Zip: TAMPA, FL 33634

Title: D () Delete
Name: HOOD, DAVID
Address: 555 KEMP RD.
City-St-Zip: DELHI, NY 13753

Title: D () Delete
Name: NICHOLAS, JUNE
Address: 3320 SOUTH TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D () Delete
Name: BRYANT, DAVID
Address: P. O. BOX 22018
City-St-Zip: PHOENIX, AZ 850280018

Title: D () Delete
Name: SMITH, KEVIN
Address: 3830 WINDERLAKES DR.
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: CHARLES BROES

D

04/05/2007

Electronic Signature of Signing Officer or Director

Date