2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F52496

City-St-Zip:

FILED Jan 06, 2008 Secretary of State

| Entity Nam | 1e: ROYAL H | ERITAGE COMPANY INC. | | | | |
|---|-----------------------|---|---|---|--------------|--|
| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | |
| 5600 WEST ORLANDO, | | DR, SUITE 202 | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | |
| 5600 WEST COLONIAL DR, SUITE 202 ORLANDO, FL 32808 | | | | POBOX536037 ORLANDO, FL 3285 | | |
| FEI Number: | 59-2253630 | FEI Number Applied For () | FEI Number Not Appl | licable () Certificate of Status Des | sired () | |
| Name and | Address of C | urrent Registered Agent: | Name and | Name and Address of New Registered Agent: | | |
| BROUMAN 733 W. COI ORLANDO, | LÓNIAL DR. | US | | | | |
| The above in the State | | submits this statement for the pu | rpose of changing i | ts registered office or registered age | nt, or both, | |
| SIGNATUR | | | | | | |
| Flection Cam | | ic Signature of Registered Ager Trust Fund Contribution (). | nt | Date | | |
| | AND DIREC | | ADDITION | IS/CHANGES TO OFFICERS AND I | DIRECTORS: | |
| | | | | | | |
| Title: Name: | PS () BROUMAND, AL | Delete | Title: Name: | P (X) Change () Addition JACK, MACLAGHLIN | | |
| Address: | 1225 AUDUBON | | Address: | 145.SWEET BAY | | |
| City-St-Zip: | ORLANDO, FL | | City-St-Zip: | LAKE MARY, FL 32746 | | |
| Title: Name: Address: City-St-Zip: | () | Delete | Title: Name: Address: City-St-Zip: | S () Change (X) Addition PHILLIP, PAUL 1800E ALTAMONTE DR ALTAMONT SPRING, FL 32714 | | |
| Title: Name: Address: City-St-Zip: | () | Delete | Title: Name: Address: City-St-Zip: | VP () Change (X) Addition BROUMAND, ALEXANDER H 1225 AUDUBON PL ORLANDO, FL 32804 | | |
| Title: Name: Address: | () | Delete | Title: Name: Address: | VP () Change (X) Addition GARVIN, BROWN PA 5600WEST COLONIL DR | | |

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.

City-St-Zip:

SUIT301, FL 32808

SIGNATURE: GARVIN BROWN PA VΡ 01/06/2008