

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001815

Entity Name: REALTY EQUITY PARTNERS, INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

% COHASSET CAPITAL  
111 POND ST.  
COHASSET, MA 02025

## New Principal Place of Business:

## Current Mailing Address:

901 PONCE DE LEON BOULEVARD  
SUITE #505  
CORAL GABLES, FL 33134

## New Mailing Address:

FEI Number: 04-3218518

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCKENNA, JOY VP  
901 PONCE DE LEON BOULEVARD  
#505  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: MCKENNA, JOY  
Address: 901 PONCE DE LEON BOULEVARD, #505  
City-St-Zip: CORAL GABLES, FL 33134

Title: TD ( ) Delete  
Name: WILSON, GRANT M  
Address: 111 POND ST.  
City-St-Zip: COHASSET, MA 02025

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JOY MCKENNA

VP

04/29/2009

Electronic Signature of Signing Officer or Director

Date