2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H55996

FILED Mar 10, 2009 Secretary of State

Entity Name: 1ST FLORIDA REAL ESTATE RESOURCES, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	JART AVENUE LES, FL 33853			
urrent M	ailing Addres	s:	New Mailing Addres	s:
	JART AVENUE LES, FL 33853			
El Number	59-2807342	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
MARTIN, 0 9200 HW	CHERYL M Y 27			
he above	LES, FL 33853 named entity s		ourpose of changing its registere	ed office or registered agent, or both,
he above the State	LES, FL 33853 named entity se of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
he above the State	LES, FL 33853 named entity se of Florida. RE:	ubmits this statement for the p		
he above the State	named entity se of Florida. RE: Electron			ed office or registered agent, or both, Date
he above the State GNATUI	named entity se of Florida. RE: Electron	ubmits this statement for the place of Signature of Registered Age Trust Fund Contribution ().	ent	
The above in the State SIGNATUR DESCRIPTION CAR DESCRIP	named entity see of Florida. RE: Electron mpaign Financing S AND DIRECT D () MARTIN, CHERT 19200 HWY 27 LAKE WALES, F PD () GRIMES, YVET	ubmits this statement for the price Signature of Registered Age Trust Fund Contribution (). FORS: Delete YL M FL 33853 Delete TE R	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name:	Date
he above the State lignature lection Car officer: title: ame: ddress: ity-St-Zip: title:	named entity see of Florida. RE: Electron mpaign Financing S AND DIRECT D () MARTIN, CHERT 19200 HWY 27 LAKE WALES, F	ubmits this statement for the price Signature of Registered Age Trust Fund Contribution (). FORS: Delete YL M FL 33853 Delete TE R ROAD	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition

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: SILVIO FAZZINI D 03/10/2009