2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000130356

Entity Name: RESOLUTE FIELD SERVICES INC

FILED May 13, 2009 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | | |
|---|--|---|---|--|--|
| | SMILL COVE, 2 RY, FL 32746 | 200 US | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| | SMILL COVE, 2 RY, FL 32746 | 200 US | | | |
| FEI Number: 20-1620782 FEI Number | | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of New Registered Agent: | | |
| Α | CE, JOE GEWOOD AVE LL, FL 32117 | | | | |
| | e named entity e of Florida. | submits this statement for the | purpose of changing its registered | d office or registered agent, or both, | |
| SIGNATUI | RE: | | | | |
| | Electro | nic Signature of Registered Ag | ent | Date | |
| | | 3(2)(b), F.S., the corporation did n g Trust Fund Contribution (). | ot receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P (DYKE, DONNA 610 KINGSMIL LAKE MARY, F | L COVE # 200 | Title: Name: Address: City-St-Zip: | () 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: DONNA MICHELLE DYKE P 05/13/2009