

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000143971

FILED  
Jul 28, 2008  
Secretary of State

Entity Name: RESOURCE FINANCIAL INC

## Current Principal Place of Business:

2221 SE GOWIN DRIVE  
PORT ST LUCIE, FL 34952

## New Principal Place of Business:

## Current Mailing Address:

2221 SE GOWIN DRIVE  
PORT ST LUCIE, FL 34952

## New Mailing Address:

FEI Number: 20-1881663

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

YORKIRONS, DENTON  
2221 SE GOWIN DRIVE  
PORT ST LUCIE, FL 34952 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: YORKIRONS, DENTON  
Address: 2221 SE GOWIN DRIVE  
City-St-Zip: PORT ST LUCIE, FL 34952

Title: T ( ) Delete  
Name: EDWARDS, FAY  
Address: 321 NW BREEZY POINT LOOP  
City-St-Zip: PORT ST LUCIE, FL 34986

Title: VP ( ) Delete  
Name: YORKIRONS, NORMA  
Address: 2221 SE GOWIN DRIVE  
City-St-Zip: PORT ST LUCIE, FL 34952

Title: S ( ) Delete  
Name: EDWARDS, BEVERLY  
Address: 1298 SE PORT ST LUCIE BLVD  
City-St-Zip: PORT ST LUCIE, FL 34952

## 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:

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: DENTON YORKIRONS

PRES

07/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date