

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000129203

**FILED**  
**Jul 20, 2009**  
**Secretary of State****Entity Name:** RESITRUST, INCORPORATED**Current Principal Place of Business:**120 S. OLIVE AVENUE  
SUITE 400  
WEST PALM BEACH, FL 33401**New Principal Place of Business:****Current Mailing Address:**120 S. OLIVE AVENUE  
SUITE 400  
WEST PALM BEACH, FL 33401**New Mailing Address:****FEI Number:** 20-3495048      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**KIELY, DAN  
120 S. OLIVE AVENUE  
SUITE 400  
WEST PALM BEACH, FL 33401 US**Name and Address of New Registered Agent:**KEEFE, ROBERT  
120 S. OLIVE AVENUE  
SUITE 400  
WEST PALM BEACH, FL 33401 US

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: ROBERT KEEFE

07/20/2009

\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:****Title:** PD      ( ) Delete  
**Name:** KIELY, DAN  
**Address:** 120 S. OLIVE AVENUE STE 400  
**City-St-Zip:** WEST PALM BEACH, FL 33401**Title:** CD      ( ) Delete  
**Name:** KEEFE, ROBERT  
**Address:** 120 S. OLIVE AVE STE 400  
**City-St-Zip:** WEST PALM BEACH, FL 33401**Title:** VD      ( ) Delete  
**Name:** BARONE, MARCELO  
**Address:** 120 S. OLIVE AVE STE 400  
**City-St-Zip:** WEST PALM BEACH, FL 33401 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD      (X) Change ( ) Addition  
**Name:** KEEFE, ROBERT  
**Address:** 120 S. OLIVE AVENUE STE 400  
**City-St-Zip:** WEST PALM BEACH, FL 33401**Title:**      ( ) Change ( ) Addition  
**Name:**      ( ) Change ( ) Addition  
**Address:**      ( ) Change ( ) Addition  
**City-St-Zip:**      ( ) Change ( ) Addition**Title:**      ( ) Change ( ) Addition  
**Name:**      ( ) Change ( ) Addition  
**Address:**      ( ) Change ( ) Addition  
**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: ROBERT KEEFE

CD

07/20/2009

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