2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2009
Secretary of State

DOCUMENT# P08000057239

Entity Name: ROYALTY CUSTODIAL SERVICES, INC.

Current Principal Place of Business:

14229 PALMETTO SPRINGS STREET
JACKSONVILLE, FL 32258 US

New Principal Place of Business:

Current Mailing Address:

14229 PALMETTO SPRINGS STREET
JACKSONVILLE, FL 32258 US

New Mailing Address:

FEI Number: 26-2809148 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOYKIN, IMANI A ESQ
1905 ATLANTIC BLVD.
JACKSONVILLE, FL 32207 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: PD ( ) Delete
Name: HARDY, WYNTON A
Address: 14229 PALMETTO SPRINGS ST.
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: VP,D ( ) Delete
Name: CLARK, KIMBERLY
Address: 12259 BUCKS HARBOR DRIVE NORTH
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: STD ( ) Delete
Name: HARDY, PARIS L
Address: 14229 PALMETTO SPRINGS ST.
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: COOD ( ) Delete
Name: HUFF, JAMES
Address: 12259 BUCKS HARBOR DRIVE NORTH
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: GMD ( ) Delete
Name: SMITH, REGINALD
Address: 12259 BUCKS HARBOR DRIVE NORTH
City-St-Zip: JACKSONVILLE, FL 32225 US

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:

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: WYNTON A. HARDY PD 03/09/2009

Electronic Signature of Signing Officer or Director — Date