

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000079408

FILED
Feb 16, 2007
Secretary of State

Entity Name: REAL TRUST FINANCIAL CORP.

Current Principal Place of Business:

1308 N. LAVON AVE.
KISSIMMEE, FL 34741 US

New Principal Place of Business:

Current Mailing Address:

P. O BOX 1631
WINDERMERE, FL 34786 US

New Mailing Address:

FEI Number: 59-3407150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BANKERS TITLE AND FUNDING CORPORATION
1308 N LAVON AVENUE
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

BOGIN, MUNNS & MUNNS (ATTORNEYS AT LAW)
2601 TECHNOLOGY DRIVE
ORLANDO, FLORIDA, FL 32804 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: HENRY COOPER, ESQ

02/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: GRAHAM, AISTROP J.D
Address: 1308 NORTH LAVON AVENUE
City-St-Zip: KISSIMMEE, FL 34741 US

Title: TREA () Delete
Name: GRAHAM, AISTROP J.D
Address: 1308 NORTH LAVON AVENUE
City-St-Zip: KISSIMMEE, FL 34741 US

Title: PRES () Delete
Name: CAS, CAMARA
Address: 1308 NORTH LAVON AVENUE
City-St-Zip: KISSIMMEE, FL 34741 US

Title: SEC () Delete
Name: CAS, CAMARA
Address: 1308 NORTH LAVON AVENUE
City-St-Zip: KISSIMMEE, FL 34741 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: CAS, CAMARA
Address: 1308 NORTH LAVON AVENUE
City-St-Zip: KISSIMMEE, FL 34741 US

Title: TREA (X) Change () Addition
Name: GRAHAM, AISTROP
Address: 1308 NORTH LAVON AVENUE
City-St-Zip: KISSIMMEE, FL 34741 US

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 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: CAS CAMARA

CEO

02/16/2007

Electronic Signature of Signing Officer or Director

Date