I hereby 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 all other like empowered.

SIGNATURE: JOANNE GAMACHE

Electronic Signature of Signing Officer/Director Detail

## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 697072** 

Entity Name: SUN WORLD TRAVEL, INC.

#### **Current Principal Place of Business:**

1120 E TENNESSEE STREET TALLLAHASSEE, FL 32308

#### **Current Mailing Address:**

1120 E TENNESSEE STREET TALLLAHASSEE, FL 32308

#### FEI Number: 59-2118255

### Name and Address of Current Registered Agent:

GAMACHE, JOANNE 3269 CITATION TRAIL TALLAHASSEE, FL 32309 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:

**Officer/Director Detail :** 

Title	VP	Title	Р
Name	GAMACHE, GILLES	Name	GAMACHE, JOANNE
Address	3269 CITATION TRAIL	Address	3269 CITATION TRAIL
City-State-Zip:	TALLAHASSEE FL 32309	City-State-Zip:	TALLAHASSEE FL 32309

# Electronic Signature of Registered Agent

PRESIDENT

01/07/2014

FILED Jan 07, 2014 Secretary of State CC2331892712

Date

Certificate of Status Desired: No

Date