

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 340048

**FILED**  
**Mar 19, 2009**  
**Secretary of State**

**Entity Name:** GULLIVER'S TRAVELS, INC.

**Current Principal Place of Business:**

1991 MAIN ST  
SUITE 110  
SARASOTA, FL 34236 US

**New Principal Place of Business:**

4448 MCASHTON RD  
SARASOTA, FL 34233 US

**Current Mailing Address:**

1991 MAIN ST  
SUITE 110  
SARASOTA, FL 34236 US

**New Mailing Address:**

4025 CATTLEMAN RD  
174  
SARASOTA, FL 34233 US

**FEI Number:** 59-1297486

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

EDWARDS, J. RILEY  
1991 MAIN ST SUITE 110  
SARASOTA, FL 34236 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: PSTD ( ) Delete  
Name: EDWARDS, J. RILEY  
Address: 5289 SUNNYDALE CR. E.  
City-St-Zip: SARASOTA, FL 34233 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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:** J. RILEY EDWARDS

PRES

03/19/2009

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

\_\_\_\_\_  
Date