## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 505020** 

Entity Name: FESTIVAL TOURS, INC.

FILED Jan 20, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

737 W OAK RIDGE RD ORLANDO, FL 32809

Current Mailing Address: New Mailing Address:

737 W OAK RIDGE RD ORLANDO, FL 32809

FEI Number: 59-1668949 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RAYMOND KEITH HECKMANN 5505 PALM LAKE CIRCLE ORLANDO, FL 32819 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:

City-St-Zip:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PV
 ( ) Delete
 Title:
 PV
 (X) Change ( ) Addition

 Name:
 HECKMANN, DAVID,
 Name:
 HECKMANN, DAVID,

 Address:
 5728 MOONLIGHT CIR.
 Address:
 5728 MOONLIGHT CIR.

ORLANDO, FL, FL City-St-Zip: ORLANDO, FL, FL 32839

Title: PVT Title: (X) Change ( ) Addition () Delete Name: HECKMANN, RAYMOND. Name: HECKMANN, RAYMOND. 5505 PALM LAKE CIRCLE 5505 PALM LAKE CIRCLE Address: Address: ORLANDO, FL ORLANDO, FL 32819 City-St-Zip: City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition
Name: SAMARILLO, CHRISTINE, H
Address: 3792 DEEO WOOD HEIGHTS
Address: 3792 DEEPWOOD HEIGHTS

City-St-Zip: MISSISSAUGA, ONTARIO, CA L5M6M6 City-St-Zip: MISSISSAUGA, ONTARIO, CA L5M6M6

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RAYMOND HECKMANN PVT 01/20/2005