

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 846955

FILED  
Apr 21, 2006  
Secretary of State

Entity Name: THOMSON HOLIDAYS SERVICES INC.

## Current Principal Place of Business:

5728 MAJOR BLVD  
SUITE 528  
ORLANDO, FL 32819 US

## New Principal Place of Business:

## Current Mailing Address:

5728 MAJOR BLVD  
SUITE 528  
ORLANDO, FL 32819 US

## New Mailing Address:

FEI Number: 36-3063348      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYES ST  
TALLAHASSEE, FL 32301 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: S ( ) Delete  
Name: CLAUSSEN, TOR  
Address: 5728 MAJOR BLVD  
City-St-Zip: ORLANDO, FL 32819

Title: P ( ) Delete  
Name: BIXBY, PAUL H  
Address: 5728 MAJOR BLVD  
City-St-Zip: ORLANDO, FL 32819

Title: D ( ) Delete  
Name: ORMESHER, LEE  
Address: 5728 MAJOR BLVD  
City-St-Zip: ORLANDO, FL 32819

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: G (X) Change ( ) Addition  
Name: WILSON, GARRY  
Address: 5728 MAJOR BLVD  
City-St-Zip: ORLANDO, FL 32819

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: PAUL BIXBY

P

04/21/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date