## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 854222** 

Entity Name: ADVENTURE FLIGHTS, LTD., INC.

FILED Jan 30, 2009 Secretary of State

US

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

1515 PERIMETER ROAD 1515 PERIMETER ROAD

PALM BEACH INTERNATIONAL AIRPORT PALM BEACH INTERNATIONAL AIRPORT

WEST PALM BEACH, 33406 WEST PALM BEACH, FL 33406

Current Mailing Address: New Mailing Address:

E.M. BUD MOLT ADVENTURE FLIGHTS
P.O. BOX 17560 3200 SUMMIT BLVD.

E.M. BUD MOLT ADVENTURE FLIGHTS
P.O. BOX 17560

WEST PALM BEACH, FL 33416 US WEST PALM BEACH, FL 33416

FEI Number: 51-0213370 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:

MOLT, E.M. BUD MOLT, EMERSON M
ADVENTURE FLIGHTS P.O. BIX 17560 1515 PERIMETER ROAD

3200 SUMMIT BLVD. WEST PALM BEACH, FL 33406 US WEST PALM BEACH, FL 33416 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: EMERSON M.MOLT 01/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: MOLT, EMERSON M, Name: MOLT, EMERSON M,

Address: 3200 SUMMIT BLVD. Address: 1515 PERIMETER ROAD
City-St-Zip: WEST PALM BEACH, FL 33406

Title: STD ( ) Delete Title: SD (X) Change ( ) Addition

 Name:
 DELANY, PATRICIA
 Name:
 DELANY, PATRICIA

 Address:
 2200 SUMMIT BLVD
 Address:
 1515 PERIMETER ROAD

 City-St-Zip:
 WEST PALM BEACH, FL 33416
 City-St-Zip:
 WEST PALM BEACH, FL 33406

Title: ( ) Delete Title: TD ( ) Change (X) Addition Name: MAURICE DEVANNEY, LOUISE

Address: Address: 1515 PERIMETER ROAD
City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33406

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: EMERSON M. MOLT PRES 01/30/2009