

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004262

FILED  
Mar 05, 2009  
Secretary of State

Entity Name: COLLETTE TRAVEL SERVICE, INC.

## Current Principal Place of Business:

1021 HILLSBORO MILE  
APT 608  
HILLSBORO BEACH, FL 33062

## New Principal Place of Business:

## Current Mailing Address:

162 MIDDLE STREET  
PAUTUCKET, RI 02860

## New Mailing Address:

162 MIDDLE STREET  
PAWTUCKET, RI 02860

FEI Number: 05-0298245

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SULLIVAN, DANIEL J JR  
1021 HILLSBORO MILE  
APT 608  
HILLSBORO BEACH, FL 33062 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: PD ( ) Delete  
Name: SULLIVAN, DANIEL J JR  
Address: 16 GARWAIN DRIVE  
City-St-Zip: LINCOLN, RI 02865

Title: S ( ) Delete  
Name: DZUIRA, WILLIAM  
Address: 13 BELLS BROOK ROAD  
City-St-Zip: LAKEVILLE, MA 02347

Title: T ( ) Delete  
Name: GALVIN, JOHN  
Address: 62 CARRIAGE DRIVE  
City-St-Zip: LINCOLN, RI 02865

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JOHN GALVIN

CFO

03/05/2009

Electronic Signature of Signing Officer or Director

Date