

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005030

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** YTB TRAVEL NETWORK OF ILLINOIS INC.

**Current Principal Place of Business:**

1901 E. EDWARDSVILLE RD.  
WOOD RIVER, IL 62095

**New Principal Place of Business:**

**Current Mailing Address:**

1901 E. EDWARDSVILLE RD.  
WOOD RIVER, IL 62095

**New Mailing Address:**

**FEI Number:** 37-1406702

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

**Title:** PCD  
**Name:** SORENSEN, KIM J  
**Address:** 1901 E. EDWARDSVILLE RD.  
**City-St-Zip:** WOOD RIVER, IL 62095 US

**Title:** VP  
**Name:** COPPERSMITH, SHELLY  
**Address:** 1901 E. EDWARDSVILLE RD.  
**City-St-Zip:** WOOD RIVER, IL 62095 US

**Title:** SEC  
**Name:** HEMANN, JEREMY  
**Address:** 1901 E. EDWARDSVILLE RD.  
**City-St-Zip:** WOOD RIVER, IL 62095 US

**Title:** TREA  
**Name:** CLAGG, ANDREW  
**Address:** 1901 E. EDWARDSVILLE RD.  
**City-St-Zip:** WOOD RIVER, IL 62095 US

**Title:** DIRE  
**Name:** VAN PATTEN, ROBERT  
**Address:** 1901 E. EDWARDSVILLE RD  
**City-St-Zip:** WOOD RIVER, IL 62095 US

I hereby 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 all other like empowered.

**SIGNATURE:** J. KIM SORENSEN

PCD

01/05/2012

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

\_\_\_\_\_  
Date