

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04675

FILED
Apr 08, 2011
Secretary of State

Entity Name: LUXURY RELOCATION SERVICES, INC.

Current Principal Place of Business:

C/O WANDA R. WOOD
1265 CREEKSIDE PARKWAY, SUITE 400
NAPLES, FL 34108 US

New Principal Place of Business:

C/O WANDA R. WOOD
9130 CORSEA DEL FONTANA WAY
NAPLES, FL 34109 US

Current Mailing Address:

C/O WANDA R. WOOD
1265 CREEKSIDE PARKWAY, SUITE 400
NAPLES, FL 34108 US

New Mailing Address:

C/O WANDA R. WOOD
9130 CORSEA DEL FONTANA WAY
NAPLES, FL 34109 US

FEI Number: 59-2034149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, WANDA R
1265 CREEKSIDE PARKWAY, SUITE 400
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

WOOD, WANDA R
9130 CORSEA DEL FONTANA WAY
NAPLES, FL 34109 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:

04/08/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S
Name: MILLER, JANE E
Address: 9130 CORSEA DEL FONTANA WAY
City-St-Zip: NAPLES, FL 34109 US

Title: T
Name: MURPHY, JAY
Address: 9130 CORSEA DEL FONTANA WAY
City-St-Zip: NAPLES, FL 34109 US

Title: P
Name: WOOD, WANDA R
Address: 9130 CORSEA DEL FONTANA WAY
City-St-Zip: NAPLES, FL 34109 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: WANDA R. WOOD

P

04/08/2011

Electronic Signature of Signing Officer or Director

Date