

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000042

Entity Name: TRAVEL HOLDINGS, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

220 EAST CENTRAL PARKWAY
SUITE 4000
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

220 EAST CENTRAL PARKWAY
SUITE 4000
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

FEI Number: 58-2487869

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGOV, URI
220 EAST CENTRAL PARKWAY, SUITE 4000
ALTAMONTE SPRINGS, FL 32701 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: DO () Delete
Name: ARGOV, URI CEO
Address: 220 EAST CENTRAL PARKWAY, STE 4000
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: O () Delete
Name: FRIEDBERG, WENDY SECY
Address: 220 EAST CENTRAL PARKWAY, SUITE 4000
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D () Delete
Name: DEVLIN, MICHAEL
Address: ONE BURTON HILLS BLVD., SUITE 180
City-St-Zip: NASHVILLE, TN 37215

Title: O () Delete
Name: FISCHER, ROBERT CFO
Address: 220 EAST CENTRAL PARKWAY, STE 4000
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D () Delete
Name: YARNELL, DAVID
Address: 263 TRESSER BLVD 9TH FLOOR
City-St-Zip: STAMFORD, CT 06901

Title: D () Delete
Name: EARTHMAN, WILLIAM
Address: 4007 HILLSBORO ROAD, SUITE A
City-St-Zip: NASHVILLE, TN 37215

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:

Title: () Change () Addition
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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: WENDY FRIEDBERG

O

03/24/2009

Electronic Signature of Signing Officer or Director

Date