## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000007217

Entity Name: FIRST CHOICE EXPEDITIONS, INC.

FILED Feb 27, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 19345 US HIGHWAY 19 NORTH SUITE 402 CLEARWATER, FL 33764 **Current Mailing Address: New Mailing Address:** 19345 US HIGHWAY 19 NORTH SUITE 402 CLEARWATER, FL 33764 FEI Number: 20-3890403 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: PRFS (X) Change ( ) Addition Name: MEE, DARREN Name: FUQUA, JERRE 19345 US HIGHWAY 19 NORTH, SUITE 402 4340 VON KARMANN, SUITE 400 Address: Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: NEWPORT BEACH, FL 92660 DVP Title: Title: () Delete () Change () Addition MCGRAYNOR, DAVID Name: Name: 19345 US HIGHWAY 19 NORTH, SUITE 402 Address: Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: Title: Title: ( ) Delete TRFA (X) Change ( ) Addition WALTER, JOYCE YOUNGBLOOD, CHRISTOPHER T MR Name: Name: 19345 US HIGHWAY 19 NORTH, SUITE 402 19345 US HIGHWAY 19 NORTH, SUITE 402 Address: Address: CLEARWATER, FL 33764 City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: Title: DVP ( ) Delete Title: () Change () Addition JOHN, ANDREW Name: Name: Address: 19345 US HIGHWAY 19 NORTH, SUITE 402 Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: Title: PRES (X) Delete Title: () Change () Addition RAAS, ALEXANDER Name: Name: 19345 US HIGHWAY 19 NORTH, SUITE 402 Address: Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: Title: TREA (X) Delete Title: () Change () Addition Name: SCHANTZ, MIKE Name: 19345 US HIGHWAY 19 NORTH, SUITE 402 Address: Address: City-St-Zip: CLEARWATER, FL 33764 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: CHRIS YOUNGBLOOD TREA 02/27/2008