

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000823

Entity Name: F & L TOURS INC.

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

5601 DUNCAN ROAD #200
PUNTA GORDA, FL 33982

New Principal Place of Business:

Current Mailing Address:

5601 DUNCAN ROAD #200
PUNTA GORDA, FL 33982

New Mailing Address:

FEI Number: 31-1510738

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROOKS, RUTH A VCHR
5601 DUNCAN ROAD #200
PUNTA GORDA, FL 33982 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: CHRM () Delete
Name: BROOKS, ROBERT K CHRM
Address: 5601 DUNCAN ROAD #200
City-St-Zip: PUNTA GORDA, FL 33982

Title: PRES () Delete
Name: BROOKS, ROBERT K PRES
Address: 5601 DUNCAN ROAD #200
City-St-Zip: PUNTA GORDA, FL 33982

Title: VCHR () Delete
Name: BROOKS, RUTH A VCHR
Address: 5601 DUNCAN ROAD #200
City-St-Zip: PUNTA GORDA, FL 33982

Title: ST () Delete
Name: BROOKS, RUTH A ST
Address: 5601 DUNCAN ROAD #200
City-St-Zip: PUNTA GORDA, FL 33982

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
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: RUTH A BROOKS

VCHR

03/20/2009

Electronic Signature of Signing Officer or Director

Date