

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004369

FILED
Apr 28, 2007
Secretary of State

Entity Name: FLORIDA VACATION COMPANY WORLDWIDE, INC

Current Principal Place of Business:

5519 GREAT HAWK CIRCLE
ANN ARBOR, MI 48108

New Principal Place of Business:

Current Mailing Address:

5519 GREAT HAWK CIRCLE
ANN ARBOR, MI 48108

New Mailing Address:

FEI Number: 20-1678353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZAHN, YOLANDA
8821 MANOR LOOP
APT. 208
BRADENTON, FL 34202 US

Name and Address of New Registered Agent:

ZAHN, YOLANDA
12334 WINDING WOODS WAY
BRADENTON, FL 34202 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: SONIA KAUFMAN

04/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KAUFMAN, SONIA
Address: 5519 GREAT HAWK CIRCLE
City-St-Zip: ANN ARBOR, MI 48108

Title: VST () Delete
Name: KAUFMAN, SONIA
Address: 5519 GREAT HAWK CIRCLE
City-St-Zip: ANN ARBOR, MI 48108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SONIA KAUFMAN

P

04/28/2007

Electronic Signature of Signing Officer or Director

Date