

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007483

FILED  
Apr 01, 2009  
Secretary of State

Entity Name: HOLIDAY TOURS INC.

**Current Principal Place of Business:**

10367 RANDLEMAN ROAD  
RANDLEMAN, NC 27317 US

**New Principal Place of Business:**

**Current Mailing Address:**

10367 RANDLEMAN ROAD  
RANDLEMAN, NC 27317 US

**New Mailing Address:**

FEI Number: 56-2005775      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCOTT, PAMELA  
6890 142ND AVENUE N  
LARGO, FL 33771 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: PTD ( ) Delete  
Name: BROWN, DAVID R  
Address: 3902 S. ROCKINGHAM ROAD  
City-St-Zip: GREENSBORO, NC 27407

Title: VD ( ) Delete  
Name: MOODY, GARY C  
Address: 5206 TIMBER TRAIL  
City-St-Zip: RANDLEMAN, NC 27317

Title: D ( ) Delete  
Name: MOODY, RHONDA B  
Address: 5206 TIMBER TRAIL  
City-St-Zip: RANDLEMAN, NC 27317

Title: S ( ) Delete  
Name: MOODY, DAVID C  
Address: 5206 TIMBER TRAIL  
City-St-Zip: RANDLEMAN, NC 27317

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition  
Name: BROWN, DAVID R  
Address: 3902 S. ROCKINGHAM ROAD  
City-St-Zip: GREENSBORO, NC 27407

Title: VP-S (X) Change ( ) Addition  
Name: MOODY, GARY C  
Address: 5206 TIMBER TRAIL  
City-St-Zip: RANDLEMAN, NC 27317

Title: DIR (X) Change ( ) Addition  
Name: MOODY, RHONDA B  
Address: 5206 TIMBER TRAIL  
City-St-Zip: RANDLEMAN, NC 27317

Title: SEC (X) Change ( ) Addition  
Name: MOODY, DAVID C  
Address: 5206 TIMBER TRAIL  
City-St-Zip: RANDLEMAN, NC 27317

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: DAVID R. BROWN

CEO

04/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date