2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005192

Entity Name: EDUCATIONAL TOURS, INC.

FILED May 06, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	STEN ROAD, D, IL 60015	SUITE 100				
Current Mailing Address:			New Maili	New Mailing Address:		
111 PFINGSTEN ROAD, SUITE 100 DEERFIELD, IL 60015						
FEI Number:	36-3334913	FEI Number Applied For ()	FEI Number Not Appl	licable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US						
The above in the State		submits this statement for the p	urpose of changing i	ts registered o	office or registered agent, or both,	
SIGNATURE:						
	Electron	ic Signature of Registered Age	nt		Date	
Election Carr	paign Financing	g Trust Fund Contribution ().				
OFFICERS	AND DIREC	TORS:	ADDITION	IS/CHANGES	TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C () RICCIARDELLI, 8 ESSEX CENT PEBODY, MA (ER DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SLOTNICK, MIT	N ROAD, SUITE 100	Title: Name: Address: City-St-Zip:	SLOTNICK, MI	EN ROAD, SUITE 100	
Title: Name: Address: City-St-Zip:	SLOTNICK, VAL	N ROAD, SUITE 100	Title: Name: Address: City-St-Zip:	SLOTNICK, VA	EN ROAD, SUITE 100	
Title: Name: Address: City-St-Zip:	POOLE, WILLIA	ES FERRY ROAD, STE. 2700	Title: Name: Address: City-St-Zip:	POOLE, WILL	CES FERRY ROAD, STE. 2700	
Title: Name: Address: City-St-Zip:	SILVER, HOWA	() Delete T. LVER, HOWARD N 1 PFINGSTEN ROAD, SUITE 100 A EERFIELD, IL 60015 C		() Change () Addition	
Title: Name: Address: City-St-Zip:	SLOTNICK, BAI	N ROAD, SUITE 100	Title: Name: Address: City-St-Zip:	SLOTNICK, BA	EN ROAD, SUITE 100	

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: BARRY SLOTNICK V 05/06/2008