

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002191

Entity Name: 1ST CLASS REUNIONS, INC.

FILED
Feb 02, 2009
Secretary of State

Current Principal Place of Business:

1170 TIMBER WALK DR.
LOGANVILLE, GA 30052

New Principal Place of Business:

Current Mailing Address:

1170 TIMBER WALK DR.
LOGANVILLE, GA 30052

New Mailing Address:

FEI Number: 41-1957572

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, RONALD E JR.
320 BONNLYN DR.
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

CHAMBERLAIN, KIRK
6156 PARK STREET
JACKSONVILLE, FL 32205 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: KIRK CHAMBERLAIN

02/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: DAVIDSON, MARILYN S
Address: 1170 TIMBER WALK DR.
City-St-Zip: LOGANVILLE, GA 30052

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPT () Change (X) Addition
Name: DAVIDSON, BYRON
Address: 1170 TIMBER WALK DR.
City-St-Zip: LOGANVILLE, GA 30052

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: MARILYN S DAVIDSON

PS

02/02/2009

Electronic Signature of Signing Officer or Director

Date