## F10000002272

(Re	equestor's Name)	
(Ad	ldress)	<u> </u>
(Ad	ldress)	
(Cit	y/State/Zip/Phon	ie #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
	•	
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 13, 2010

H.E. SMITH YOUR VACATION PLANNERS, INC. 4401 EAST COLONIAL, STE 203 ORLANDO, FL 32803

SUBJECT: YOUR VACATION PLANNERS, INC.

Ref. Number: F10000002272

We have received your document for YOUR VACATION PLANNERS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is no provision for a foreign corporation to file an amendment to change officers and/or directors its first year of qualification. Please submit an Affidavit signed by an officer or director listing the titles, names, and addresses of the officers and/or directors. After the first year of qualification, changes can be made on the corporation annual report which is filed between January 1 and May 1 each year.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 310A00021689

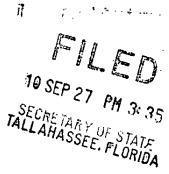
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Returned
9/23/2010

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: YOUR VACA	Name of Corporation
	/ 000000 2 2 7 2
The enclosed Affidavit by Foreign (submitted for filing.	Corporation to Change/Add Officer(s) and/or Director(s) and fee an
Please return all correspondence cor	ncerning this matter to the following:
M. Leon Williams Name of Contact Pe	rson
Your VACAtion Pla	maers, Inc
4401 E. Colonial Address	Dr. Suite203
ORLANDO, FL City/State and Zip	72803-5200 Code
Leon & Time out for E-mail address: (to be used for fur	ture annual report notification)
For further information concerning  Mir Musel Contact Person	this matter, please call:  at (8/2) 243-1533  Area Code & Daytime Telephone Number
	o the Florida Department of State for the following amount:
Already Pd,	ling Fee & te of Status  S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

(Note: Applicable only during the first calendar year of qualification)

1. The name of the foreign corporation  Your VACATION	n as it appears on the records of the Florida Department of State is:
2. This entity was authorized to transa number is F0000026	ct business in Florida on MAY 13, 2010 and its Florida document
3. This corporation was formed under	the laws of
4. The name and address of each offic	er and/or director is as follows:
Title: Preside	Name and Address  H.E. Saith  1709 KASAYUTE Ave.  Lebanoa IN 46052
Vice Praident	Michelle Thiene 1704 Witt Rd Lebanon, IN 46052
<u>VicePresident</u> -Operation	M. Leon Willyams 12345 NARCCOSSEE Rd ORLANDO, FL 32814
gnature of an officer or director	additional pages if necessary)  Title of person signing
ed or printed name of person signing	FILING FEE \$35  Make checks payable to Florida Department of State and Mail to: Division of Corporations • PO Box 6327 • Tallahassee, FL 32314

CR2E127 (8/08)