

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12087

FILED  
Feb 19, 2009  
Secretary of State

Entity Name: CERTIFIED TOURS, INC.

## Current Principal Place of Business:

110 E BROWARD BLVD  
FLOOR 14  
FT. LAUDERDALE, FL 33301

## New Principal Place of Business:

## Current Mailing Address:

110 E BROWARD BLVD  
FLOOR 14  
FT. LAUDERDALE, FL 33301

## New Mailing Address:

FEI Number: 59-2074101      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

C/O TRIPP, SCOTT C  
SMITH, DENNIS DUSTIN  
110 SE 6TH STREET 28TH FLOOR  
FT. LAUDERDALE, FL 33301 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: D ( ) Delete  
Name: EGAN, MICHAEL S  
Address: 110 E BROWARD BLVD  
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: TD ( ) Delete  
Name: LEBOWITZ, ROBIN  
Address: 110 BROWARD BLVD.  
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: S ( ) Delete  
Name: TRIPP, NORMAN D  
Address: 110 S.E. 6TH STREET  
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D ( ) Delete  
Name: KELLY, WILLIAM H JR  
Address: 55 EAST MONROE ST. STE. 4620  
City-St-Zip: CHICAGO, IL 60603

Title: VP ( ) Delete  
Name: DAVISON, NICHOLAS  
Address: 110 E. BROWARD BLVD.  
City-St-Zip: FORT LAUDERDALE, FL 33301

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: NDAVISON

VP

02/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date