

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G40418

FILED  
Jan 05, 2004  
Secretary of State

Entity Name: WORLD CLASS TRAVEL SERVICE, INC.

## Current Principal Place of Business:

808 N.W. 13TH STREET  
GAINESVILLE, FL 32601

## New Principal Place of Business:

## Current Mailing Address:

808 N.W. 13TH STREET  
GAINESVILLE, FL 32601

## New Mailing Address:

FEI Number: 59-2313253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TODD, ROBERT L  
6203 NW 31ST TERRACE  
GAINESVILLE, FL 32601 US

## Name and Address of New Registered Agent:

TODD, ROBERT L  
6203 NW 31ST TERRACE  
GAINESVILLE, FL 32653 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: \_\_\_\_\_

01/05/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: TODD, ROBERT L  
Address: 6203 NW 31ST TERRACE  
City-St-Zip: GAINESVILLE, FL 32683

Title: VP ( ) Delete  
Name: BUDD, HARVEY  
Address: 3111 NW 9TH PLACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: T ( ) Delete  
Name: GOMEZ-TODD, JANET  
Address: 5203 NW 31ST TERRACE  
City-St-Zip: GAINESVILLE, FL 32653

## 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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT LEE TODD

P

01/05/2004

Electronic Signature of Signing Officer or Director

Date