

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H61029

FILED
Apr 22, 2009
Secretary of State

Entity Name: SPORTSMAN'S TRAVEL, INC.

Current Principal Place of Business:

1903 ATLANTIC ST
213
MELBOURNE BEACH, FL 32951 US

New Principal Place of Business:

Current Mailing Address:

20201 EAST COUNTRY CLUB DRIVE
2504
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 59-2814854 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KORNIK, GARY
19801 NE 29TH AVE.
100
AVENTURA, FL 33180 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: TD () Delete
Name: MARGOLIS, ARLENE
Address: 1903 ATLANTIC ST., #213
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: PD () Delete
Name: MARGOLIS, HERBERT B.
Address: 1903 ATLANTIC STREET #213
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VD () Delete
Name: MARGOLIS, MICHAEL C.
Address: 2639 N.E. 26TH CT.
City-St-Zip: FT. LAUDERDALE, FL

Title: SD () Delete
Name: MARGOLIS, ARLENE
Address: 1903 ATLANTIC STREET #213
City-St-Zip: MELBOURNE BEACH, FL 32951

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:

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: ARLENE MARGOLIS

SECR

04/22/2009

Electronic Signature of Signing Officer or Director

Date