2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H84854

Entity Name: MIDNIGHT SUN TOURS, INC.

FILED Mar 19, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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220 S. DIXIE HWY., SUITE 2 LAKE WORTH, FL 33460 220 S DIXIE HWY SUITE 2

LAKE WORTH, FL 33460

New Mailing Address: Current Mailing Address:

220 S. DIXIE HWY., SUITE 2 LAKE WORTH, FL 33460 5430 LBJ FREEWAY, 3 LINCOLN CENTER STE 1075

DALLAS, TX 75240

FEI Number: 59-2642791 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324

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:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Delete Title: () Change () Addition

BERGSTROM, WILLIAM PRESDIR Name: Name: 5430 LBJ FREEWAY,3 LINCOLN CENTER,STE 1075 Address: Address:

City-St-Zip: DALLAS, TX 75240 City-St-Zip:

VPGM Title: VPD Title: () Delete (X) Change () Addition Name: FINKE, ROBERT VPMNGR Name: FINKE, ROBERT VPD

5430 LBJ FREEWAY,3 LINCOLN CENTER,STE 1075 220 S. DIXIE HWY., SUITE 2 Address: Address: DALLAS, TX 75240 LAKE WORTH, FL 33460 City-St-Zip: City-St-Zip:

Title: Title: DSTV () Delete (X) Change () Addition DSTV

MANEY, GEORGE VSETRED MANEY, GEORGE DSTV Name: Name: 5430 LBJ FREEWAY,3 LINCOLN CENTER,STE 1075 220 S DIXIEHWY SUITE 2 Address: Address:

City-St-Zip: DALLAS, TX 75240 City-St-Zip: LAKE WORTH, FL 33460

Title: ASV () Delete Title: ASVP (X) Change () Addition

KING, LINDA KING, LINDA ASVP Name: Name: 220 S. DIXIE HWY., SUITE 2 Address: 5430 LBJ FREEWAY,3 LINCOLN CENTER,STE 1075 Address: City-St-Zip: DALLAS, TX 75254 City-St-Zip: LAKE WORTH, FL 33460

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: LAURA.LOUIS@WOLTERSKLUWER.COM POA 03/19/2009