## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J07166

Entity Name: ALL TRAVEL CENTER, INC.

FILED Mar 22, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5889 SO WILLIAMSON BLVD 4343 RIDGEWOOD AVE

STE 206 STE A

PORT ORANGE, FL 32128 US PORT ORANGE, FL 32127 US

Current Mailing Address: New Mailing Address:

5889 SO WILLIAMSON BLVD 4343 RIDGEWOOD AVE

STE 206 STE A

PORT ORANGE, FL 32128 US PORT ORANGE, FL 32127 US

FEI Number: 59-2662179 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:

WATTS, DANIEL P.M. WATTS, DANIEL P.M. 6529 SHAHAB LANE

PORT ORANGE, FL 32128 US PORT ORANGE, FL 32128 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: 03/22/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PTSD

 Name:
 WATTS, DANIEL P.M.

 Address:
 6529 SHAHAB LANE

 City-St-Zip:
 PORT ORANGE, FL 32128

Title: V

Name: MILLS, RONNIE

Address: 1321 JACKSON WOODS RD

City-St-Zip: DELAND, FL 32724

I hereby 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 all other like empowered.

SIGNATURE: DANIEL P M WATTS PTSD 03/22/2011