2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J29349

Entity Name: FLORIDA TRAVEL CENTER, INC.

FILED Feb 03, 2006 Secretary of State

| Current Principal Place of Business: | | New Princ | New Principal Place of Business: | |
|---|---|---|---|--|
| SUITE 2005 | LAS AVENUE 5 TE SPRINGS, FL 32714 US | 2431 ALON SUITE 238 WINTER P. | IA AVE. ARK, FL 32792 US | |
| Current Mailing Address: | | New Mailir | New Mailing Address: | |
| SUITE 2009 | LAS AVENUE 5 FE SPRINGS, FL 32714 US | 2431 ALOM SUITE 238 WINTER P. | 1A AVE. ARK, FL 32792 US | |
| FEI Number: | 59-2708680 FEI Number Appli | ed For () FEI Number Not Appli | cable () Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | |
| APOPKA, F | CRAFT DRIVE L 32712 US named entity submits this stater | nent for the purpose of changing it | s registered office or registered agent, or both, | |
| SIGNATUR | E: | | | |
| Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). | | | Date | |
| | | , , | O/OLIANO | |
| OFFICERS | AND DIRECTORS: | ADDITION | S/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P () Delete MORAN, LILLIAN M 900 WOODCRAFT DRIVE APOPKA, FL 32712 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | ST () Delete MORAN, EDWARD J 900 WOODCRAFT DRIVE APOPKA, FL 32712 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () Delete MALONEY, LYNN A 69 HIGH POINT NORTH DR. NEWNAN, GA 30265 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () Delete MORAN, CRAIG A 2555 FAIRWAYS DR. HOMESTEAD, FL 33035 | Title: Name: Address: City-St-Zip: | D (X) Change () Addition MORAN, CRAIG A 12501 HOGANS ALLEY CHESTER, VA 23836 US | |
| Title: Name: Address: City-St-Zip: | D () Delete MORAN, CARON E 3447 KENTSHIRE BOULEVARD OCOEE, FL 34761 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () Delete CHAPIRO-MORAN, KRISTEN L 3447 KENTSHIRE BLVD OCOEE, FL 34761 | Title: Name: Address: City-St-Zip: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the 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: EDWARD J. MORAN ST 02/03/2006