## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J58647

Entity Name: ADVENTURES UNLIMITED TRAVEL. INC

FILED Apr 30, 2006 Secretary of State

Entity Name. ADVEN	TORES UNLIMITED TRAVEL, III	VC.		
Current Principal Place of Business:		New Principal Place of Business:		
45 KINDRED STREET STUART, FL 34994	US			
Current Mailing Address:		New Mailing Address:		
45 KINDRED STREET STUART, FL 34994	US			
FEI Number: 59-2780512	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of	f Current Registered Agent:	Name and Address of	lame and Address of New Registered Agent:	
RICHARD, NUNN 45 SE KINDRED ST STUART, FL 34994	US			
The above named entit in the State of Florida.	ry submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent			Date	
Electr	onic Signature of Registered Ageing Trust Fund Contribution ().	ent	Date	

## **OFFICERS AND DIRECTORS:**

STUART, FL

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition Title: ( ) Delete Title: NUNN, RICHARD R., NUNN, RICHARD R., Name: Name: 4311 SE GENEVA DRIVE Address: 4311 SE GENEVA DRIVE Address: City-St-Zip: STUART, FL City-St-Zip: STUART, FL 34997 Title: () Delete Title: (X) Change ( ) Addition TALBOT, DAWN ELAINE. TALBOT, DAWN ELAINE. Name: Name: Address: Address: 4311 SE GENEVA DRIVE 1758 SW BUCKSKIN TRAIL STUART, FL STUART, FL 34997 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete (X) Change ( ) Addition Name: NUNN, PEGGY A., Name: NUNN, PEGGY A., Address: 4311 SE GENEVA DRIVE Address: 4311 SE GENEVA DRIVE

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.

City-St-Zip:

STUART, FL 34997

SIGNATURE: DAWN TALBOT ST 04/30/2006