

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J65847

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** ADVENTURE VACATION RENTALS, INC.

**Current Principal Place of Business:**

950 SE 21ST AVE  
GAINESVILLE, FL 32641 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 140297  
GAINESVILLE, FL 32614 US

**New Mailing Address:**

**FEI Number:** 59-2817073      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ERB, THOMAS COOK  
10915 SW 16 ST  
MICANOPY, FL 32667 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:** P  
**Name:** ERB, THOMAS COOK  
**Address:** 10915 SW 16 ST  
**City-St-Zip:** MICCANOPY, FL 32667 US

**Title:** VP  
**Name:** BURKE, THOMAS EDWARD  
**Address:** 6046 FAIRVIEW DRIVE  
**City-St-Zip:** PARK CITY, UT 84098 US

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:** THOMAS COOK ERB

PRES

04/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date