2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J73127

FILED Jan 07, 2005 Secretary of State

Entity Name: FLORIDA EAST COAST TRAVEL SERVICES, INC.

	rincipal Place of Business:	New Principal Place	of Business:
2175 NW	3.HOBBS / 98TH AVE GARDENS, FL 33016		
Current M	lailing Address:	New Mailing Addres	s:
2175 NW	3. HOBBS / 98TH AVE GARDENS, FL 33016		
El Number	: 59-2814838 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
lame and	I Address of Current Registered Agent	t: Name and Address o	of New Registered Agent:
2175 NW	OSEPH B / 98TH AVE GARDENS, FL 33016 US		
	e named entity submits this statement for e of Florida.	the purpose of changing its registere	d office or registered agent, or both,
SIGNATU			
	Electronic Signature of Registered	-	Date
lection Ca	mpaign Financing Trust Fund Contribution ().		
FFICER	S AND DIRECTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR
itle: ame: ddress: ity-St-Zip:	P () Delete ROU, H JENNINGS II PO DWR 1130 EUSTIS, FL	Title: Name: Address: City-St-Zip:	() Change () Addition
itle: lame: ddress: ity-St-Zip:	ST () Delete HOBBS, JOSEPH B 12175 NW 98TH AVENUE HIALEAH GARDENS, FL	Title: Name: Address: City-St-Zip:	() Change () Addition
ame: ddress: ity-St-Zip: itle: ame: ddress:	HOBBS, JOSEPH B 12175 NW 98TH AVENUE	Name: Address:	() Change () Addition () Change () Addition
ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip: itle: ame: ddress:	HOBBS, JOSEPH B 12175 NW 98TH AVENUE HIALEAH GARDENS, FL D () Delete ROWE, MORGAN 4401 E COLONIAL DRIVE	Name: Address: City-St-Zip: Title: Name: Address:	
lame: ddress:	HOBBS, JOSEPH B 12175 NW 98TH AVENUE HIALEAH GARDENS, FL D () Delete ROWE, MORGAN 4401 E COLONIAL DRIVE ORLANDO, FL 32814 D () Delete RUSSO, JOSEPH RT 9W	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSEPH B. HOBBS ST 01/07/2005