2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2006
Secretary of State

DOCUMENT# J73127

Entity Name: FLORIDA EAST COAST TRAVEL SERVICES, INC.

Current Principal Place of Business:

JOSEPH B.HOBBS
12175 NW 98TH AVE
HIALEAH GARDENS, FL 33016

New Principal Place of Business:

Current Mailing Address:

JOSEPH B. HOBBS
12175 NW 98TH AVE
HIALEAH GARDENS, FL 33016

New Mailing Address:

JOSEPH B. HOBBS
12175 NW 98TH AVE
HIALEAH GARDENS, FL 33018

FEI Number: 59-2814838 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HOBBS, JOSEPH B
12175 NW 98TH AVE
HIALEAH GARDENS, FL 33016 US

Name and Address of New Registered Agent:

HOBBS, JOSEPH B
12175 NW 98TH AVE
HIALEAH GARDENS, FL 33018 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: JOSEPH B. HOBBS 02/22/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ROU, H JENNINGS II
Address: PO DWR 1130
City-St-Zip: EUSTIS, FL

Title: ST ( ) Delete
Name: HOBBS, JOSEPH B
Address: 12175 NW 98TH AVENUE
City-St-Zip: HIALEAH GARDENS, FL

Title: D ( ) Delete
Name: ROWE, MORGAN
Address: 4401 E COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32814

Title: D ( ) Delete
Name: RUSSO, JOSEPH
Address: RT 9W
City-St-Zip: MILTON, NY

Title: VP ( ) Delete
Name: YOUNG, JOHN
Address: 7 MAIN ST
City-St-Zip: GOFFSTOWN, NH

Title: ST ( ) Delete
Name: STUART, MICHAEL
Address: PO BOX 140155
City-St-Zip: ORLANDO, FL 328140155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change ( ) Addition
Name: HOBBS, JOSEPH B
Address: 12175 NW 98TH AVENUE
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JOSEPH B HOBBS ST 02/22/2006
Electronic Signature of Signing Officer or Director Date