2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2008
Secretary of State

DOCUMENT# J73127

Entity Name: FLORIDA EAST COAST TRAVEL SERVICES, INC.

Current Principal Place of Business:

12175 NW 98TH AVE
HIALEAH GARDENS, FL 33016

New Principal Place of Business:

12175 NW 98TH AVE
HIALEAH GARDENS, FL 33018

Current Mailing Address:

12175 NW 98TH AVE
HIALEAH GARDENS, FL 33018

New Mailing Address:

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

Name and Address of Current Registered Agent:

HOBBS, JOSEPH B
12175 NW 98TH AVE
HIALEAH GARDENS, FL 33018 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	( ) 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 33018	
Title:	D	( ) Delete
Name:	CINDY, CLARK	
Address:	P.O. BOX 1439	
City-St-Zip:	COLORADO SPRING, CO 809011439	
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:	D	( ) 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:	( ) 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:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify 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 01/04/2008

Electronic Signature of Signing Officer or Director Date