2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K14657

Entity Name: SUN POINT TRAVEL, INC.

FILED Feb 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1312 APOLLO BEACH BLVD. 3604 GAVIOTA DRIVE H RUSKIN, FL 33573 US

APOLLO BEACH, FL 33572 US

Current Mailing Address: New Mailing Address:

6504 SURFSIDE BLVD 3604 GAVIOTA DRIVE H RUSKIN, FL 33573 US

APOLLO BEACH, FL 33572 US

FEI Number: 59-2870774 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WITSIL, ROBERT L P
6504 SURFSIDE BLVD
7

BORIS, MARGARET P
3604 GAVIOTA DRIVE
RUSKIN, FL 33573 US

APOLLO BEACH, FL 33572 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: MARGARET BORIS 02/01/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: WITSIL, ROBERT L Name: BORIS, MARGARET

 Address:
 6504 SURFSIDE BLVD, SUITE 7
 Address:
 3604 GAVIOTA DRIVE

 City-St-Zip:
 APOLLO BCH, FL 33572 US
 City-St-Zip:
 RUSKIN, FL 33573 US

Title: Title: () Delete (X) Change () Addition Name: CALVIN, WILLIAM. Name: CALVIN, WILLIAM D 922 EAGLE LN 922 EAGLE LN Address: Address: APOLLO BCH, FL APOLLO BCH, FL City-St-Zip: City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition

Name:WITSIL, PATRICIA AName:SHUTE, LORI A VPAddress:6504 SURFSIDE BLVD, SUITE 7Address:820 GOLF ISLAND DRIVECity-St-Zip:APOLLO BEACH, FL 33572 USCity-St-Zip:APOLLO BEACH, FL 33572 US

Title: () Delete Title: (X) Change () Addition WITSIL, KRYSTAL L GAGLIARDI, DOLORES A S Name: Name: Address: 6504 SURFSIDE BLVD Address: 1347 MISTY GREENS DRIVE City-St-Zip: APOLLO BEACH, FL 33572 US City-St-Zip: SUN CITY CENTER, FL 33573 US

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: MARGARET BORIS P 02/01/2007