2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K54983

FILED Jan 29, 2005 Secretary of State

Entity Name: REGENCY TRAVEL OF NAPLES, INC.

Name and Address of Current Registered Agent: ALLAN, CHRIS 1786 TRADE CENTER WAY #2 NAPLES, FL 34109 US The above named entity submits this statement for the purpose of changing its registered office or registered at in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND Title: Name: ALLAN, CHRIS Address: 1786 TRADE CENTER WAY, #2 Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: Title: VP () Delete Title: () Change () Addition Name: Na					
#2 NAPLES, FL 34109 US Current Mailing Address: New Mailing Address: 1786 TRADE CENTER WAY #2 NAPLES, FL 34109 US FEI Number: 65-0091792 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Name and Address of Current Registered Agent: Name and Address of New Registered Agent: Name and Address of New Registered Agent: Name and Address of New Registered Agent: Name and Address of New Registered Agent: ALLAN, CHRIS 1786 TRADE CENTER WAY #2 NAPLES, FL 34109 US The above named entity submits this statement for the purpose of changing its registered office or registered a in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AN Itile: PST () Delete Title: () Change () Addition Name: ALLAN, CHRIS Address: 1786 TRADE CENTER WAY, #2 City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34109 Title: VP () Delete Title: () Change () Addition Name: BARRAN, SYLVESTRE Name: BARRAN, SYLVESTRE	New Principal Place of Business:		Current Principal Place of Business:		
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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: CHRIS ALLAN PRES 01/29/2005