## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# K84447

FILED Jan 18, 2006 Secretary of State

Entity Name: TRAVEL SERVICES UNLIMITED, INC.

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

726 S DALE MABRY TAMPA, FL 33609 US

Current Mailing Address: New Mailing Address:

726 S DALE MABRY TAMPA, FL 33609 US

FEI Number: 59-2946358 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:

GILBERT, JEAN B 726 SOUTH DALE MABRY TAMPA, FL 33609 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 GILBERT, JEAN B.,
 Name:
 GILBERT, JEAN B.,

 Address:
 926 GOLF VIEW ST
 Address:
 926 GOLF VIEW ST

 City-St-Zip:
 TAMPA, FL
 City-St-Zip:
 TAMPA, FL
 33629

Title: DV ( ) Delete Title: DV (X) Change ( ) Addition Name: MACFAWN, MONIKA, Name: MACFAWN, MONIKA,

 Address:
 955 40TH AVE N
 Address:
 555 5TH AVENUE NE SUITE 1222

 City-St-Zip:
 ST. PETERSBURG, FL
 City-St-Zip:
 ST. PETERSBURG, FL 33701

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

 Name:
 GILBERT, LEONARD H.,
 Name:
 GILBERT, LEONARD H.,

 Address:
 926 GOLF VIEW ST
 Address:
 926 GOLF VIEW ST

 City-St-Zip:
 TAMPA, FL
 33629

Title: () Delete Title: (X) Change ( ) Addition MACFAWN, FREDERICK H, . MACFAWN, FREDERICK H, . Name: Name: Address: 955 40TH AVE N Address: 555 5TH AVENUE NE SUITE 1222 City-St-Zip: City-St-Zip: ST. PETERSBURG, FL ST. PETERSBURG, FL 33701

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: JEAN B. GILBERT DP 01/18/2006