

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000031416

Entity Name: TOURIFFIC TRAVEL, LLC

FILED
Jul 21, 2009
Secretary of State

Current Principal Place of Business:

7312 CALADESIA DR
SARASOTA, FL 34243

New Principal Place of Business:

6708 CHESWICK DR
SARASOTA, FL 34243

Current Mailing Address:

7312 CALADESIA DR
SARASOTA, FL 34243

New Mailing Address:

6708 CHESWICK DR
SARASOTA, FL 34243

FEI Number: 20-8730415 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WILLIS, DEBORAH
3408 28TH ST E
BRADENTON, FL 34208 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OWENS, LINDA
Address: 7312 CALADESIA DR
City-St-Zip: SARASOTA, FL 34243

Title: MGRM () Delete
Name: WILLIS, DEBORAH
Address: 3408 28TH ST E
City-St-Zip: BRADENTON, FL 34208

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: OWENS, LINDA
Address: 6708 CHESWICK DR
City-St-Zip: SARASOTA, FL 34243

Title: MGR (X) Change () Addition
Name: WILLIS, DEBORAH
Address: 3408 28TH ST E
City-St-Zip: BRADENTON, FL 34208

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DEBORAH WILLIS

MGR

07/21/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date