

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L72552

FILED
Mar 08, 2006
Secretary of State

Entity Name: ENTERPRISE TRAVEL SERVICE, INC.

Current Principal Place of Business:

7221 FOREST OAKS BLVD
SPRING HILL, FL 34606 US

New Principal Place of Business:

12242 MONARCO LANE
SPRING HILL, FL 34609 US

Current Mailing Address:

7221 FOREST OAKS BLVD
SPRING HILL, FL 34606 US

New Mailing Address:

12242 MONARCO LANE
SPRING HILL, FL 34609 US

FEI Number: 59-3010559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKUSE, LAUREN L P
7221 FOREST OAKS BLVD.
SPRING HILL, FL 34606 US

Name and Address of New Registered Agent:

SKUSE, LAUREN L P
12242 MONARCO LANE
SPRING HILL, FL 34609 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:

03/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SKUSE, LAUREN L MISS
Address: 12242 MONARCO LANE
City-St-Zip: SPRING HILL, FL 34609 US

Title: VP () Delete
Name: SKUSE, LAWRENCE C MR
Address: 450 LITTLE PATH RD
City-St-Zip: DES PLAINES, IL 60016 US

Title: SE () Delete
Name: SKUSE, SHARON C MRS
Address: 450 LITTLE PATH RD
City-St-Zip: DES PLAINES, IL 60016 US

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:

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: LAUREN SKUSE

P

03/08/2006

Electronic Signature of Signing Officer or Director

Date