

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000332

FILED
Mar 04, 2009
Secretary of State

Entity Name: LADIES SPIRIT TOUR INC.

Current Principal Place of Business:

311 MONTEGO CT SE
WINTER HAVEN, FL 33884

New Principal Place of Business:

Current Mailing Address:

PO BOX 891
EAGLE LAKE, FL 33839

New Mailing Address:

FEI Number: 80-0031048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARKLEY, HEATHER J
1602 W. RIVER DRIVE
MARGATE, FL 33063 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARKLEY, HEATHER J
Address: 1602 W. RIVER DRIVE
City-St-Zip: MARGATE, FL 33063

Title: VD () Delete
Name: CASE, ROBERTA
Address: PO BOX 891
City-St-Zip: EAGLE LAKE, FL 33839

Title: T () Delete
Name: RODRIGUEZ, JUAN
Address: 9369 GETTYSBURG RD
City-St-Zip: BOCA RATON, FL 33434

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HEATHER BARKLEY

PD

03/04/2009

Electronic Signature of Signing Officer or Director

Date