

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000034768

FILED  
Mar 30, 2010  
Secretary of State

Entity Name: A & T TRAVEL & TOURS, INC.

**Current Principal Place of Business:**

9951 ATLANTIC BLVD  
SUITE 167  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

9951 ATLANTIC BLVD  
SUITE 167  
JACKSONVILLE, FL 32225

**New Mailing Address:**

FEI Number: 32-0095179

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TORMON, NOEL R  
2052 WATERFRONT LANE  
JACKSONVILLE, FL 32246 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: TORMON, NOEL A  
Address: 2052 WATERFOOT LN  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D  
Name: WEIRICH, MARLENE  
Address: 2052 WATERFRONT LANE  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D  
Name: TORMON, AILEEN  
Address: 2052 WATERFRONT LANE  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D  
Name: TORMON, NEIL A  
Address: 2052 WATERFRONT LANE  
City-St-Zip: JACKSONVILLE, FL 32246

I hereby 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 all other like empowered.

SIGNATURE: NOEL R. TORMON

PRES

03/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date