## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000081093

Entity Name: VACATION SOLUTIONS ENTERPRISES, INC.

FILED Jan 11, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

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

640 GEORGE WASHINGTON HWY. 13 BRANCH STREET SUITE 103 SUITE 105

LINCOLN, RI 02865 METHUEN, MA 01844

**Current Mailing Address: New Mailing Address:** 

717 EAST OAK STREET KISSIMMEE, FL 34744 US

FEI Number: 51-0417542 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:

SWART, HARRY J SWART, BAUMRUK & COMPANY, LLP 717 E. OAK STREET 717 E. OAK STREET KISSIMMEE, FL 34744 KISSIMMEE, FL 34744 US 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: HARRY J. SWART, CPA 01/11/2008 Electronic Signature of Registered Agent Date

Title:

DPST

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

DPST () Delete

Name: WILKIE, TED

Title:

Name: WILKIE, TED 640 GEORGE WASHINGTON HWY., STE. 103 Address: 13 BRANCH STREET, STE. 105 Address:

City-St-Zip: LINCOLN, RI 02865 City-St-Zip: METHUEN, MA 01844

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

Name: WILKE, JOHN E Name: WILKE, JOHN E

640 GEORGE WASHINGTON HWY., STE. 103 Address: 13 BRANCH STREET, STE. 105 Address:

LINCOLN, RI 02865 METHUEN, MA 01844 City-St-Zip: 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TED WILKIE **PRES** 01/11/2008

Electronic Signature of Signing Officer or Director

Date