2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2007
Secretary of State

DOCUMENT# P03000024809

Entity Name: TRAVEL EGYPT INC.

Current Principal Place of Business:

401 S. 15TH STREET
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

4015 NINE MCFARLAND DRIVE #150
ALPHARETTA, GA 30004

Current Mailing Address:

P.O. BOX 1023
ALPHARETTA, GA 30009

New Mailing Address:

P.O. BOX 365
ALPHARETTA, GA 30009

FEI Number: 58-2526687 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCKENDREE, TERRY V
401 S. 15TH STREET
FERNANDINA BEACH, FL 32034 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: P ( ) Delete
Name: MCKENDREE, TERRY V
Address: 401 S. 15TH STREET
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: V ( ) Delete
Name: MCKENDREE, CARSON B
Address: 401 S. 15TH STREET
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: T ( ) Delete
Name: MCKENDREE, MEGHAN C
Address: 401 S. 15TH STREET
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: S ( ) Delete
Name: MCKENDREE, TERRY V
Address: 401 S. 15TH STREET
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change ( ) Addition
Name: MCKENDREE, CARSON B
Address: 4015 NINE MCFARLAND DRIVE #150
City-St-Zip: ALPHARETTA, GA 30004

Title: T (X) Change ( ) Addition
Name: MCKENDREE, MEGHAN C
Address: 4015 NINE MCFARLAND DRIVE #150
City-St-Zip: ALPHARETTA, GA 30004

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: TERRY MCKENDREE P 03/02/2007
Electronic Signature of Signing Officer or Director Date