

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000041615

Entity Name: R.V. TOURS, INC.

FILED  
Apr 26, 2009  
Secretary of State

**Current Principal Place of Business:**

32838 STATE ROAD 44  
DELAND, FL 32720

**New Principal Place of Business:**

3 LAKESHORE DR.  
PIERSON, FL 32180

**Current Mailing Address:**

377 WOODY LANE  
ASHEVILLE, NC 28804

**New Mailing Address:**

FEI Number: 01-0808239

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SIMMS, PENNY L  
32838 STATE ROAD 44  
DELAND, FL 32720 US

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

VEZINA, DIANE  
3 LAKESHORE DR.  
PIERSON, FL 32180 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: DIANE VEZINA

04/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MARTIN, MARCELLE L  
Address: 377 WOODY LANE  
City-St-Zip: ASHEVILLE, NC 28804

Title: PST ( ) Delete  
Name: LAWRENCE, GISELE  
Address: 32838 STATE ROAD 44  
City-St-Zip: DELAND, FL 32720

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: PST (X) Change ( ) Addition  
Name: LAWRENCE, GISELE  
Address: 3 LAKESHORE DR.  
City-St-Zip: PIERSON, FL 32180

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: GISELE LAWRENCE

PST

04/26/2009

Electronic Signature of Signing Officer or Director

Date