2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# P03000089814

Entity Name: CAPE CORAL TRAVEL INC.

Current Principal Place of Business:

1616 W. CAPE CORAL PKWY., SUITE 114
CAPE CORAL, FL 33914

New Principal Place of Business:

1616 W. CAPE CORAL PKWY., SUITE 117
CAPE CORAL, FL 33914

Current Mailing Address:

1616 W. CAPE CORAL PKWY., SUITE 114
CAPE CORAL, FL 33914

New Mailing Address:

1616 W. CAPE CORAL PKWY., SUITE 117
CAPE CORAL, FL 33914

FEI Number: 75-3142117 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PORTER, CHRISTINA
1616 W. CAPE CORAL PKWY., SUITE 114
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

PORTER, CHRISTINA
1616 W. CAPE CORAL PKWY., SUITE 117
CAPE CORAL, FL 33914 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: 04/14/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: PORTER, CHRISTINA
Address: 1616 W. CAPE CORAL PKWY., SUITE 114
City-St-Zip: CAPE CORAL, FL 33914

Title: VD ( ) Delete
Name: MARTIN, PATRICIA P
Address: 1616 W. CAPE CORAL PKWY., SUITE 114
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: PORTER, CHRISTINA
Address: 1616 W. CAPE CORAL PKWY., SUITE 117
City-St-Zip: CAPE CORAL, FL 33914

Title: VD (X) Change ( ) Addition
Name: MARTIN, PATRICIA P
Address: 1616 W. CAPE CORAL PKWY., SUITE 117
City-St-Zip: CAPE CORAL, FL 33914

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: CHRISTINA D. PORTER PD 04/14/2009
Electronic Signature of Signing Officer or Director — Date