2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000105617

5328 CORTEZ COURT

CAPE CORAL, FL 33904

Address:

City-St-Zip:

FILED Apr 06, 2006 Secretary of State

Entity Nan	ne: TRAVELF	ARTNERS USA, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	OND CENTEF RS, FL 33912	R COURT BUILDING 200			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	OND CENTER RS, FL 33912	R COURT BUILDING 200			
FEI Number:	20-0251841	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
MOORE, JOHN L 200 SOUTH ORANGE AVENUE SARASOTA, FL 34236 US				SCHILLING, REX 5328 CORTEZ COURT CAPE CORAL, FL, FL 33904 US	
The above in the State		submits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: REX SCHILLING				04/06/2006	
	Electron	ic Signature of Registered Age	ent	Date	
Election Cam	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MATTY, WILLIA	S COURT NUMBER 202	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DPT () HARP, FRANK I 29 GALENTE C FORT MYERS,	OURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () GIBSON, JAME 8109 MIDNIGHT SARASOTA, FL	PASS ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	PRES () SCHILLING, RE	Delete X	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: REX SCHILLING PRES 04/06/2006