

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000055836

FILED
May 10, 2006
Secretary of State

Entity Name: FLORIDA TRAVEL ESCAPES INC.

Current Principal Place of Business:

434 S ALDERWOOD ST
WINTER SPRINGS, FL 32708

New Principal Place of Business:

258 W. STATE ROAD 434
LONGWOOD, FL 32750

Current Mailing Address:

434 S ALDERWOOD ST
WINTER SPRINGS, FL 32708

New Mailing Address:

FEI Number: 20-0940509 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HUGGINS, TODD
Address: 434 S ALDERWOOD ST
City-St-Zip: WINTER SPRINGS, FL 32708

Title: S () Delete
Name: HUGGINS, EDITH
Address: 434 S ALDERWOOD ST
City-St-Zip: WINTER SPRINGS, FL 32708

Title: T () Delete
Name: HUGGINS, JACK
Address: 434 S ALDERWOOD ST
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: TODD HUGGINS

P

05/10/2006

Electronic Signature of Signing Officer or Director

Date