2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000112909

Entity Name: FLORIDA GOLF & TRAVEL, INC.

FILED Apr 27, 2005 Secretary of State

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Current P	rincipal Place of Business:	New Princ	New Principal Place of Business:		
	ANDHILLS BLVD. EN, NC 28315				
Current M	lailing Address:	New Maili	New Mailing Address:		
	ANDHILLS BLVD. EN, NC 28315				
FEI Number: FEI Number Applied For ()		FEI Number Not App	licable (X)	Certificate of Status Desired ()	
Name and	I Address of Current Registered Agent	t: Name and	Name and Address of New Registered Agent:		
660 EAST	S FILINGS INCORPORATED JEFFERSON ST. SSEE, FL 32301 US				
	named entity submits this statement for t e of Florida.	the purpose of changing i	its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electronic Signature of Registered	Agent		Date	
Election Car	mpaign Financing Trust Fund Contribution ().				
OFFICER	S AND DIRECTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () Delete REID, CARL 39 BIRCH LANE MYRTLE BEACH, SC 29572	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () Delete ROSE, MICHAEL 39 BIRCH LANE MYRTLE BEACH, SC 29572	Title: Name: Address: City-St-Zip:	VD ROSE, MIC 3870 CAME MYRTLE BI		
Title: Name: Address: City-St-Zip:	S () Delete RUSSELL, TAMMY 202 FANCY ACRES LANE CARTHAGE, NC 28327	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete REID, CARL JR. P.O. BOX 1175 SOUTHERN PINES, NC 283881175	Title: Name: Address: City-St-Zip:	T REID, CARI P.O. BOX 1 SOUTHERN		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TAMMY RUSSELL S 04/27/2005