2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000144923

Entity Name: JW FAMILY TRAVEL, INC.

FILED May 03, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6299 W. SUNRISE BLVD., STE. 217-D 6299 W. SUNRISE BOULEVARD, SUNRISE, FL 33313

SUITE 217-D

SUNRISE, FL 33313

Current Mailing Address: New Mailing Address:

6299 W. SUNRISE BLVD., STE. 217-D 6299 W. SUNRISE BOULEVARD SUNRISE, FL 33313

SUITE 217-D

SUNRISE, FL 33313

FEI Number: 77-0651235 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WALTERS, JUNE WALTERS, JUNE 6299 W SÚNRISE BOULEVARD 6320 NW 11TH STREET SUITE 217-D **UNIT 103** SUNRISE, FL 33313 US SUNRISE, FL 33313 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: JUNE WALTERS 05/03/2006

> 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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

JUNE, WALTERS WALTERS, JUNE MRS Name: Name:

6299 W. SUNRISE BLVD., STE. 217-D 6299 W. SUNRISE BLVD., STE. 217-D Address: Address:

SUNRISE, FL 33313 City-St-Zip: SUNRISE, FL 33313 City-St-Zip:

VΡ Title: VΡ Title: () Delete (X) Change () Addition Name: JACOB, WALTERS Name: WALTERS, JACOB MR

6299 W. SUNRISE BLVD., STE. 217-D 6299 W. SUNRISE BLVD., STE. 217-D Address: Address: SUNRISE, FL 33313 SUNRISE, FL 33313 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition TR JADINE, WALTERS WALTERS, JADINE MS Name: Name:

6299 W. SUNRISE BLVD., STE. 217-D 6299 W. SUNRISE BLVD., STE. 217-D Address Address:

City-St-Zip: SUNRISE, FL 33313 City-St-Zip: SUNRISE, FL 33313

Title: () Delete Title: () Change (X) Addition WALTERS, JELANI E MR Name: Name:

Address: Address: 6299 W SUNRISE BLVD, STE 217-D City-St-Zip: City-St-Zip: SUNRISE, FL 33313 US

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.

Ρ SIGNATURE: JUNE WALTERS 05/03/2006