

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000028394

Entity Name: DISTINCTIVE ESCAPES, INC.

FILED
Apr 17, 2009
Secretary of State**Current Principal Place of Business:**3525 W LAKE MARY BLVD
SUITE 308
LAKE MARY, FL 32746**New Principal Place of Business:****Current Mailing Address:**3525 W LAKE MARY BLVD
SUITE 308
LAKE MARY, FL 32746**New Mailing Address:**

FEI Number: 20-2401353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:MORSE, CRAIG S
3525 W LAKE MARY BLVD STE 308
LAKE MARY, FL 32746 US**Name and Address of New Registered Agent:**LAURA, CLARE
3525 W LAKE MARY BLVD STE 308
LAKE MARY, FL 32746 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: LAURA CLARE

04/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: O () Delete
Name: MORSE, CRAIG S
Address: 3525 W LAKE MARY BLVD STE 308B
City-St-Zip: LAKE MARY, FL 32746**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: DPST (X) Change () Addition
Name: LAUA, CLARE
Address: 3525 W LAKE MARY BLVD STE 308B
City-St-Zip: LAKE MARY, FL 32746

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: LAURA CLARE

DPST

04/17/2009

Electronic Signature of Signing Officer or Director

Date