## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P05000154855

FILED Jul 05, 2009 Secretary of State

D O O O IV.		,000101000	ocorciary or orace					
Entity Nan	ne: 1ST STC	P GROUP TRAVEL PLANNE	ERS, INC.					
Current Principal Place of Business:				New Principal Place of Business:				
	ΓΗ KIRKMAN ), FL 32811							
Current Ma	ailing Addre	ss:		New Maili	ng Address:			
	ΓΗ KIRKMAN ), FL 32811	ROAD #192 US						
FEI Number:	87-0757099	FEI Number Applied For ( )	FEI Nur	nber Not Appl	icable ( )	Certificate of Sta	atus Desired ( )	
Name and	Address of 0	Current Registered Agent:		Name and	Address of I	New Registered	d Agent:	
	ARYL C FH KIRKMAN 9, FL 32811							
	named entity of Florida.	submits this statement for the	purpose o	of changing it	ts registered o	office or register	red agent, or both,	
SIGNATUR								
	Electro	nic Signature of Registered A	gent			Date		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	YOUNG, DARY	(IRKMAN ROAD #192		Title: Name: Address: City-St-Zip:	YOUNG, DARY 4630 SOUTH F	(IRKMAN ROAD #1		

Title: ( ) Delete Title: ( ) Change (X) Addition HIGLEY, RALPH G MR Name: Name: Address: Address: 4630 SOUTH KIRKMAN ROAD #192 ORLANDO, FL 32811 US City-St-Zip: City-St-Zip:  $(\ ) \ Change \ (X) \ Addition$ Title: Title: () Delete Name: Name: THOMAS, KEVIN O MR Address: Address: 4630 SOUTH KIRKMAN ROAD #192 City-St-Zip: City-St-Zip: ORLANDO, FL 32811 US Title: () Delete Title: ( ) Change (X) Addition BYTHWOOD, SENECA T MR Name: Name: 4630 SOUTH KIRKMAN ROAD #192 Address: Address: ORLANDO, FL 32811 US City-St-Zip: City-St-Zip:

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:	DARYL YOUNG	Р	07/05/2009