

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000120400

**FILED**  
**Feb 19, 2009**  
**Secretary of State**

**Entity Name:** DEBBIE BRIMS TRAVEL PROFESSIONAL INC

**Current Principal Place of Business:**

2897 JOANNA DR  
EUSTIS, FL 32726

**New Principal Place of Business:**

252 WEST ARDICE AVE  
333  
EUSTIS, FL 32726

**Current Mailing Address:**

2897 JOANNA DR  
EUSTIS, FL 32726

**New Mailing Address:**

252 WEST ARDICE AVE  
333  
EUSTIS, FL 32726

**FEI Number:** 20-5598598

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRIMS, DEBRA L  
2897 JOANNA DR  
EUSTIS, FL 32726 US

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

BRIMS, DEBRA L  
252 WEST ARDICE AVE  
333  
EUSTIS, FL 32726 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:** DEBRA BRIMS

02/19/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** BRIMS, DEBRA L  
**Address:** 2897 JOANNA DR  
**City-St-Zip:** EUSTIS, FL 32726

**Title:** VP ( ) Delete  
**Name:** BRIMS, MICHAEL E  
**Address:** 2897 JOANNA DR  
**City-St-Zip:** EUSTIS, FL 32726

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** P (X) Change ( ) Addition  
**Name:** BRIMS, DEBRA L  
**Address:** 252 WEST ARDICE AVE #333  
**City-St-Zip:** EUSTIS, FL 32726

**Title:** VP (X) Change ( ) Addition  
**Name:** BRIMS, MICHAEL E  
**Address:** 252 WEST ARDICE AVE #333  
**City-St-Zip:** EUSTIS, FL 32726

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:** MICHAEL BRIMS

VP

02/19/2009

Electronic Signature of Signing Officer or Director

Date