

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000051672

Entity Name: DADE CITY TOURS, INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

14950 US HWY 301  
NORTH DADE CITY, FL 33523

## New Principal Place of Business:

15000 CITRUS COUNTRY DRIVE  
SUITE 105  
DADE CITY, FL 33523

## Current Mailing Address:

14950 US HWY 301  
NORTH DADE CITY, FL 33523

## New Mailing Address:

15000 CITRUS COUNTRY DRIVE  
SUITE 105  
DADE CITY, FL 33523

FEI Number: 35-2297373

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DIAZ, JOSEPH L  
2522 WEST KENNEDY BLVD  
TAMPA, FL 33609 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GUEDRY, JAMES E  
Address: 14950 US HWY 301  
City-St-Zip: NORTH DADE CITY, FL 33523

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: GUEDRY, JAMES E  
Address: 15000 CITRUS COUNTRY DRIVE STE 105  
City-St-Zip: DADE CITY, FL 33523

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: JAMES E GUEDRY

D

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date