

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000086256

Entity Name: THOMAS TRAVEL, INC.

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5100 FOLIAGE WAY  
ST. AUGUSTINE, FL 32092

**New Principal Place of Business:**

**Current Mailing Address:**

5100 FOLIAGE WAY  
ST. AUGUSTINE, FL 32092

**New Mailing Address:**

FEI Number: 21-6065638

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HALL, CHARLES E  
77 ALMERIA STREET  
ST. AUGUSTINE, FL 32084 US

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

THOMAS, MICHELE E  
5100 FOLIAGE WAY  
ST. AUGUSTINE, FL 32092 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: MICHELE THOMAS

03/22/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: THOMAS, MICHELE  
Address: 5100 FOLIAGE WAY  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: DIR  
Name: THOMAS, MICHELE  
Address: 5100 FOLIAGE WAY  
City-St-Zip: ST. AUGUSTINE, FL 32092

I hereby 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 all other like empowered.

SIGNATURE: MICHELE THOMAS

PRES

03/22/2011

Electronic Signature of Signing Officer or Director

Date