

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000021519

Entity Name: MY CHARITY TRAVEL, INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

3665 EAST BAY DRIVE  
204  
LARGO, FL 33771

## New Principal Place of Business:

3665 EAST BAY DRIVE  
204-267  
LARGO, FL 33771

## Current Mailing Address:

3665 EAST BAY DRIVE  
204  
LARGO, FL 33771

## New Mailing Address:

3665 EAST BAY DRIVE  
204-267  
LARGO, FL 33771

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LARSON, HERBERT W JR  
11199 69TH STREET NORTH  
LARGO, FL 33773 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: PRES ( ) Delete  
Name: WILSON, JON C  
Address: 1642 SUMMERDALE DR.  
City-St-Zip: CLEARWATER, FL 33764

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: MCCRAW, KELTON G  
Address: 1000 COVE CAY DRIVE #3-C  
City-St-Zip: CLEARWATER, FL 33760

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: KELTON G MCCRAW

PRES

04/30/2009

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

\_\_\_\_\_ Date