

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000051397

Entity Name: CRUZNFLY TRAVEL INC.

FILED  
Apr 09, 2012  
Secretary of State

**Current Principal Place of Business:**

23224 COCONUT SHORES DRIVE  
BONITA SPRINGS, FL 34134

**New Principal Place of Business:**

**Current Mailing Address:**

23224 COCONUT SHORES DRIVE  
BONITA SPRINGS, FL 34134

**New Mailing Address:**

FEI Number: 90-0736593

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FORD, SUE R  
23224 COCONUT SHORES DRIVE  
BONITA SPRINGS, FL 34134 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FORD, SUE R  
Address: 23224 COCONUT SHORES DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VP  
Name: GERMAINE, RAMONDETTA S  
Address: FAIRWAY DUNES CT  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: SECT  
Name: RAMONDETTA, GERMAINE S  
Address: 25530 FAIRWAY DUNES CT.  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: TREA  
Name: BAILEY, STEVEN E  
Address: 4012 S.E. 19TH AVE, C204  
City-St-Zip: CAPE CORAL, FL 33904

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: SUE R. FORD

P

04/09/2012

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

\_\_\_\_\_ Date