

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000054571

FILED
Mar 08, 2004
Secretary of State

Entity Name: OUTLAW ADVENTURE TOURS, INC.

Current Principal Place of Business:

801 SEABREEZE BLVD
STE A125
FT LAUDERDALE, FL 33316 US

New Principal Place of Business:

Current Mailing Address:

6410 CROSSBON CT
DAVIE, FL 33331 US

New Mailing Address:

6410 CROSSBOW CT
DAVIE, FL 33331 US

FEI Number: 65-0592365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KILBORN, SHARON H
6410 CROSSBORO COURT
DAVIE, FL 33331

Name and Address of New Registered Agent:

KILBORN, SHARON H
6410 CROSSBOW COURT
DAVIE, FL 33331

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:

03/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LUGINBUHL, DEAN A
Address: 6410 CROSSBOW CT.
City-St-Zip: FORT LAUDERDALE, FL 33331

Title: STD () Delete
Name: LUGINBUHL, WAYNE E
Address: 1005 SEA BREEZE BLVD
City-St-Zip: FT LAUDERDALE, FL

Title: V () Delete
Name: WALLACE, RON
Address: 10375 NW 31 ST.
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WAYNE E. LUGINBUHL

STD

03/08/2004

Electronic Signature of Signing Officer or Director

Date