2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000060021

Entity Name: WALKABOUT CHARTERS, INC.

FILED Apr 29, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

WELLINGTON, FL 33414

GANNON, PETER

(X) Change () Addition

(X) Change () Addition

| Current Princip | al Place of Business: | New Princip | al Place of Business |
|-----------------|-----------------------|-------------|----------------------|
| | | | |

11924 W FOREST HILL BLVD
STE 22-349
WELLINGTON, FL 33414

11924 W FOREST HILL BLVD
STE 22-350
WELLINGTON, FL 33414

WELLINGTON, FL 33414

Current Mailing Address: New Mailing Address:

11924 W FOREST HILL BLVD
STE 22-349
WELLINGTON, FL 33414

11924 W FOREST HILL BLVD
STE 22-350
WELLINGTON, FL 33414

WELLINGTON, FL 33414

FEI Number: 59-3456732 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GANNON, JOHN TIMOTHY

11924 W FOREST HILL BLVD

STE 22 BOX 349

WELLINGTON, FL 33414 US

GANNON, JOHN TIMOTHY

11924 W FOREST HILL BLVD

STE 22 BOX 350

WELLINGTON, FL 33414 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: 04/29/2004

Electronic Signature of Registered Agent Date

Title:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GANNON, JOHN TIMOTHY

Name: GANNON, JOHN TIMOTHY
Address: 11924 W FOREST HILL BLVD STE 22-349
Name: GANNON, JOHN TIMOTHY
Address: 11924 W FOREST HILL BLVD STE 22-350

City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete Title: Name: GANNON, PETER Name:

Address: 11924 W FOREST HILL BLVD STE 22-349 Address: 11924 W FOREST HILL BLVD STE 22-350

City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WELLINGTON, FL 33414

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: JOHN TIMOTHY GANNON D 04/29/2004

Electronic Signature of Signing Officer or Director

Date