

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000076866

FILED  
Jan 04, 2008  
Secretary of State

Entity Name: CARD'S CRUISE CONNECTION INCORPORATED

**Current Principal Place of Business:**

6591 CHESTNUT CIR  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

6591 CHESTNUT CIRCLE  
NAPLES, FL 34109 US

**New Mailing Address:**

FEI Number: 14-1762588

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WOOD, DOUGLAS A  
SIESKY PILON & WOOD  
1000 NORTH TAMiami TRAIL #201  
NAPLES, FL 34102 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: PD ( ) Delete  
Name: CARD, FRANCES  
Address: 6591 CHESTNUT CIR  
City-St-Zip: NAPLES, FL 34109

Title: VD ( ) Delete  
Name: CARD, MARTIN  
Address: 6591 CHESTNUT CIR  
City-St-Zip: NAPLES, FL 34109

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: MARTIN CARD

VD

01/04/2008

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

\_\_\_\_\_  
Date