2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000038310

Entity Name: VACATION PLANNERS INTERNATIONAL, INC.

FILED Mar 21, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1140 E. ALTAMONTE DRIVE 2221 LEE ROAD SUITE 1019 2221 LEE ROAD SUITE 27

ALTAMONTE SPRINGS, FL 32701 WINTER PARK, FL 32789

Current Mailing Address: New Mailing Address:

1140 E. ALTAMONTE DRIVE 2221 LEE ROAD

SUITE 1019 SUITE 27

ALTAMONTE SPRINGS, FL 32701 WINTER PARK, FL 32789

FEI Number: 59-3519066 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:

GAGLIANO, ANTHONY M
1140 E. ALTAMONTE DRIVE

GAGLIANO, ANTHONY M
2221 LEE ROAD

1140 E. ALTAMONTE DRIVE 2221 LEE RO SUITE 1019 SUITE 27

SUITE 1019 SUITE 27
ALTAMONTE SPRINGS, FL 32701 US SUITE 27
WINTER PARK, FL 32789 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: ANTHONY M. GAGLIANO 03/21/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

Title: CEOT () Delete Title: CEOT (X) Change () Addition

 Name:
 GAGLIANO, ANTHONY M
 Name:
 GAGLIANO, ANTHONY M

 Address:
 1140 E. ALTAMONTE DR., SUITE 1019
 Address:
 2221 LEE ROAD, SUITE 27

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701
 City-St-Zip:
 WINTER PARK, FL 32789

Title: VPST () Delete Title: VPST (X) Change () Addition

Name:GAGLIANO, MICHAEL RName:GAGLIANO, MICHAEL RAddress:1140 E. ALTAMONTE DR., SUITE 1019Address:2221 LEE ROAD, SUITE 27City-St-Zip:ALTAMONTE SPRINGS, FL 32701City-St-Zip:WINTER PARK, FL 32789

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: ANTHONY M. GAGLIANO CEO 03/21/2005