

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000088061

FILED
Apr 28, 2009
Secretary of State

Entity Name: VACATION SERVICES AND MORE CORPORATION

Current Principal Place of Business:

214 NE 23RD AVE.
CAPE CORAL, FL 33909

New Principal Place of Business:

Current Mailing Address:

214 NE 23RD AVE
CAPE CORAL, FL 33909

New Mailing Address:

FEI Number: 65-0969215 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLURE ACCOUNTING LLC
3665 BONITA BEACH ROAD
STE. 3
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: BAUER, HARALD
Address: 1110 SW 28TH STREET
City-St-Zip: CAPE CORAL, FL 33914

Title: VSD () Delete
Name: BAUER, ULRIKE
Address: 1110 SW 28TH STREET
City-St-Zip: CAPE CORAL, FL 33914

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: ULRIKE BAUER

_____ Electronic Signature of Signing Officer or Director

DVS

04/28/2009

_____ Date