## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S64517

Entity Name: LEISURE TRAVEL, INC.

FILED Apr 28, 2005 Secretary of State

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

10941 N 56TH ST

TEMPLE TERRACE, FL 33617 US

Current Mailing Address: New Mailing Address:

10941 N 56TH ST

TEMPLE TERRACE, FL 33617 US

FEI Number: 59-3076111 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:

SWOPE, DALE M.
777 S. HARBOUR ISLAND BLVD.
SUITE 850
SWOPE, DALE M.
1234 E 5TH AVE
TAMPA, FL 33605 US

TAMPA, FL 33602 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: 04/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: HAMILTON, SANDI J., Name: HAMILTON, SANDI J.,

 Address:
 10600 N. 56TH STREET
 Address:
 10941N. 56TH STREET

 City-St-Zip:
 TEMPLE TERRACE, FL 33617
 City-St-Zip:
 TEMPLE TERRACE, FL 33617

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

 Name:
 HAMILTON, SANDI J.,
 Name:
 HAMILTON, SANDI J.,

 Address:
 10600 N. 56TH STREET
 Address:
 10941 N. 56TH STREET

 City-St-Zip:
 TEMPLE TERRACE, FL 33617
 City-St-Zip:
 TEMPLE TERRACE, FL 33617

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

Name: SWOPE, S. MORRIS, Name: SWOPE, S. MORRIS,
Address: 10600 N. 56TH STREET Address: 10941 N. 56TH STREET
City-St-Zip: TEMPLE TERRACE, FL 33617 City-St-Zip: TEMPLE TERRACE, FL 33617

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: SANDI HAMILTON PD 04/28/2005