No. **C 160853**	**Due no later than Jun 30, 2009** **Annual Report Form**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** TRAVEL MANAGEMENT PARTNERS, INC. JOHN W LEWIS 7208 FALLS OF NEUSE ROAD SUITE 220 RALEIGH NC 27615 USA	NATIONAL REGISTERED AGENTS INC 1423 TYRELL LANE BOISE ID 83706- USA 3. New Registered Agent Signature:*

4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	JOHN W LEWIS	7208 FALLS OF NEUSE RD SUITE 220	RALEIGH	NC	USA	27615

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
NC **C 160853**	Signature: John W Lewis	Date: 06/17/2009
	Name (type or print): John W Lewis	Title: President

Processed 06/17/2009

* Electronically provided signatures are accepted as original signatures.