

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # G41479 (8)

1. Corporation Name
A TRAVEL PLACE OF JACKSONVILLE, INC.

Principal Place of Business 533 ATLANTIC BLVD. ATLANTIC BCH FL 32233	Mailing Address 533 ATLANTIC BLVD. ATLANTIC BCH FL 32233
---	---



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 1713 PENMAN ROAD	26 SAME			05/31/1983	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
				59-2648098	
22 JACKSONVILLE BEACH		27		5. Certificate of Status Desired <input type="checkbox"/>	
City & State		City & State		\$8.75 Additional Fee Required	
23 FL		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
City		City		\$5.00 May Be Added to Fees	
24 32250		25 US		29	
Zip		Country		30	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DAVIDSON, LINDA 533 ATLANTIC BLVD. ATLANTIC BCH FL 32233				81 Name			
				SAME			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				1713 PENMAN ROAD			
				83 JACKSONVILLE BEACH			
				84 City			
				FL			
				85 Zip Code			
				32250			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Linda Davidson* **Linda Davidson, Pres.** DATE: **4-7-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	1.1 TITLE	SAME
NAME	DAVIDSON, LINDA	1.2 NAME	
STREET ADDRESS	533 ATLANTIC BLVD.	1.3 STREET ADDRESS	1713 PENMAN ROAD
CITY-ST-ZIP	ATLANTIC BCH, FL 00000	1.4 CITY-ST-ZIP	JACKSONVILLE BEACH, FL 32250
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Linda Davidson* **Linda Davidson, President** DATE: **4-7-98**

CR2E034 (10/97)