

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 9:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S04355** (1)

1. Corporation Name

PROMOTIONAL TRAVEL ON THE BAY, INC.

Principal Place of Business

Mailing Address

**3816 N LINEBAUGH AVE
S300
TAMPA FL 33624**

**3816 N LINEBAUGH AVE
S300
TAMPA FL 33624**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/02/1990

3a. Date of Last Report

07/01/1994

2. Principal Place of Business

2a. Mailing Address

21 12926 N. Dale Mabry

26 12926 N. Dale Mabry

Suite, Apt. #, etc

Suite, Apt. #, etc

22

27

City & State

City & State

23 Tampa, FL 33618

28 Tampa, FL 33618

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-3047363

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BURKETT, FRANK S.
12926 N. DALE MABRY HWY.
TAMPA FL 33618**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

(Signature, typed or printed name of registered agent and the 4 applicable)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
D
NAME
BURKETT, FRANK S.
STREET ADDRESS
3816 W LINEBAUGH S300
CITY, ST, ZIP
TAMPA FL

1.1 TITLE
P.D.
1.2 NAME
Burkett, Frank S.
1.3 STREET ADDRESS
12926 N. Dale Mabry
1.4 CITY, ST, ZIP
Tampa, FL 33618
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110 (07200), 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, such as indicated with an address.

SIGNATURE:

Frank S. Burkett

Frank S. Burkett, Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-95

813-960-7771