

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000007015

**Entity Name:** TRAVEL TOPPERS TOURS, INC

**Current Principal Place of Business:**

8603 SW 86TH CIRCLE  
OCALA, FL 34481

**Current Mailing Address:**

8603 SW 86TH CIRCLE  
OCALA, FL 34481

**FEI Number: 53-3040053**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GAITCH, INGEBORG  
8603 SW 86TH CIRCLE  
OCALA,, FL 34481 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name GAITCH, INGEBORG  
Address 8603 SW 86TH CIRCLE  
City-State-Zip: Ocala FL 34481

Title VP1  
Name HOOD, PATRICIA  
Address 8981B SW 94TH LANE  
City-State-Zip: Ocala FL 34481

Title VP2  
Name HEIN, LINDA  
Address 9682 SW 92ND PLACE ROAD  
City-State-Zip: Ocala FL 34481

Title SEC  
Name SWING, JOSEPHINE  
Address 8880C SW 98TH STREET ROAD  
City-State-Zip: Ocala FL 34481

Title TREASURER  
Name AMBROSE, GAIL  
Address 8827 SW 83RD CIRCLE  
City-State-Zip: Ocala FL 34481

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: INGEBORG GAITCH**

**PRESIDENT**

**04/19/2014**

Electronic Signature of Signing Officer/Director Detail

Date