

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000009678

Entity Name: EURO TRIPPER INC**Current Principal Place of Business:**11134 OXBRIDGE WAY
FORT MYERS, FL 33913**Current Mailing Address:**11134 OXBRIDGE WAY
FORT MYERS, FL 33913 US**FEI Number:** 46-3957115**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARNEY, PAUL R
11134 OXBRIDGE WAY
FORT MYERS, FL 33913 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	PRES
Name	BARNEY, PAUL R
Address	11134 OXBRIDGE WAY
City-State-Zip:	FORT MYERS FL 33913

Title	VP
Name	BARNEY, KIM
Address	11134 OXBRIDGE WAY
City-State-Zip:	FORT MYERS FL 33913

Title	TREA
Name	BARNEY, PAUL
Address	11134 OXBRIDGE WAY
City-State-Zip:	FORT MYERS FL 33913

Title	DIR
Name	BARNEY, PAUL
Address	11134 OXBRIDGE WAY
City-State-Zip:	FORT MYERS FL 33913

Title	ASST
Name	BARNEY, PAUL
Address	11134 OXBRIDGE WAY
City-State-Zip:	FORT MYERS FL 33913

Title	ASST
Name	BARNEY, PAUL
Address	11134 OXBRIDGE WAY
City-State-Zip:	FORT MYERS FL 33913

Title	NO DOUGH VW DIRECTOR
Name	DWYER, WILLIAM NICHOLAS
Address	1941 MARSH HEN VILLAGE
City-State-Zip:	DELAND FL 32720

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: PAUL BARNEY**CEO****01/07/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date