

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # 290243

(5)

95 JUN 15 AM 11:40

1. Corporation Name

BRADENTON TRAVEL SERVICE, INC.

Principal Place of Business

548 12TH STREET WEST
P.O. DRAWER 1668
BRADENTON FL 34205-7411

Mailing Address

548 12TH STREET WEST
P.O. DRAWER 1668
BRADENTON FL 34205-7411

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/25/1965

3a. Date of Last Report
05/01/1994

4. FEI Number
59-1097688

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

PLUM, GARY W
1509 4TH ST WEST
PALMETTO FL 33561

10. Name and Address of New Registered Agent

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 of person or persons named as registered agent and new registered agent.

Signature of Registered Agent (signature required when registering).

(S&P)

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
PD
PLUM, GARY W
1509 4TH ST., WEST
PALMETTO FL

2. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
VD
PLUM, FRED C
1509 4TH ST., WEST
PALMETTO FL

3. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
ST
PLUM, BETTY W
1509 4TH ST., WEST
PALMETTO FL

4. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
V
PLUM, MICHELLE A
1509 4TH ST WEST
PALMETTO FL

5. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP
☐ Change ☐ Addition

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

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

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

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP
D Linda Carlson
4334 15th Way
Palmetto, FL 34221
☐ Change ☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP
Denise Cabanillas
4334 15th Way
Palmetto FL 34221
☐ 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 119.07(3)(b), 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:

Signature and typed or printed name of signing officer or director
Michelle A Plum VP

Date
6/13/95 (813)748 0065