

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

0089534 AV

DOCUMENT # 450522

1. Entity Name

WINTER PARK TRAVEL, INC.

04-09-2002 90053 009 ***150.00

Principal Place of Business

**333 PARK AVE S
 WINTER PARK FL 32789
 US**

Mailing Address

**PO BOX 290
 WINTER PARK FL 32790-0290
 US**

2. Principal Place of Business

2669 W. Kelly Park Rd.

3. Mailing Address

PO Box 949

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Apopka, FL

City & State

Apopka, FL

4. FEI Number

59-1525501

Applied For

Not Applicable

Zip

Country

32712

USA

Zip

Country

32704

USA

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**BADGLEY, AMY JO
 333 PARK AVE S
 APOPKA FL 32712**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

AMY-JO LEHRER

Signature, typed or printed name of registered agent and title if applicable.

AMY-JO LEHRER

(NOTE: Registered Agent signature required when reinstating)

3/27/02

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete

**P
 BADGLEY, AMY JO
 2669 W KELLY PARK RD
 APOPKA FL 32712**

TITLE ☒ Delete

**VP
 BADGLEY, JEFFREY SCOTT
 5507 INTERBAY BLVD,
 TAMPA FL 33611**

TITLE ☐ Delete

TITLE ☐ Delete

TITLE ☐ Delete

TITLE ☐ Delete

TITLE ☐ Delete

TITLE ☐ Delete

TITLE ☐ Delete

TITLE ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

AMY-JO LEHRER

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

AMY-JO LEHRER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/02 407-814-8075

Date

Daytime Phone #

CR2E034 (9/01)