

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 27, 2005 8:00 am
Secretary of State

07-27-2005 90050 022 ***150.00

DOCUMENT # 476612

1. Entity Name

UNITED NATIONAL TRAVEL OF TITUSVILLE, INC.



Principal Place of Business

2500 S WASHINGTON AVE
SUITE 59
TITUSVILLE FL 32780
US

Mailing Address

2500 S WASHINGTON AVE
SUITE 59
TITUSVILLE FL 32780
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1597011

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MURELL, MARY
3482 SOUTH STREET
TITUSVILLE FL 32780

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

7/20/05

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	MURELL, MARY	
STREET ADDRESS	3482 SOUTH STR	
CITY - ST - ZIP	TITUSVILLE, FL 00000	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	MURELL, JOANNE F	
STREET ADDRESS	3482 SOUTH STR	
CITY - ST - ZIP	TITUSVILLE, FL 00000	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	JOHN MURELL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	3482 SOUTH ST	
STREET ADDRESS	TITUSVILLE, FL 32780	
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mary Murell

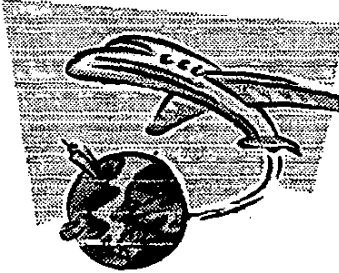
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/20/05 321 267-1033

Date

Daytime Phone #

ATTACHMENT



50058079
476612

United National Travel
2500 S. Washington Ave.
Suite 59
Titusville, FL 32780
Ph 321 267-1033 Fx 321 267-0988

July 21, 2005

To Whom it May Concern:

I would like to request a waiver of the late filing fee due to the fact that we never received the 2005 Annual Report.

We have been in business for over 30 years and have never filed late.

I have enclosed a check for \$150.

Thank you in advance for your assistance.

Sincerely,

Mary Murell

Mary Murell