2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

AND FILED

03 SEP 22 PM 5:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09/17/03 90019 017 #61-25

2003 AMENDED

DOCUMENT # 521422

1. Entity Name
HOLIDAY ON WHEELS, INC.

Principal Place of Business	Mailing Address
4100 W. 23RD STREET PANAMA CITY, FL 32405	4100 W. 23RD STREET PANAMA CITY, FL 32405

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 59-1711357 ☐ 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
MEADOWS, DAVID M 230 WOODLAWN DRIVE PANAMA CITY, FL 32407	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when executing)

FILE (YEAR) FEE IS $150.00
After May 1, 2003 Fee Will be $550.00
Amended UBR is $61.25
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MEADOWS, MURIEL 2531 W 9TH ST PANAMA CITY, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Asst Tr Meadows, Muriel 2531 W 9th St Panama City FL 32405	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MEADOWS, DAVID M 230 WOODLAWN DRIVE PANAMA CITY BCH, FL00000, 32407	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/S Meadows, Diane G 230 Woodlawn Drive PanamaCity Beach FL 32407	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MEADOWS, DIANE 230 WOODLAWN DRIVE PANAMA CITY BCH, FL 32407	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Asst V Meadows, Ryan M 125 Laird Circle Panama City Beach FL 32408	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Meadows,Kimberly G 4101 Bay Point Road # 4149 Panama City Bch FL 32408	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

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: David M Meadows 9/15/03 850 785 1566
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #