FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

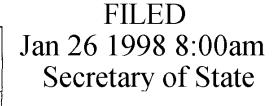
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 69377

(6)

VACATION ADVERTISING, INC.



	ed For pplicable litional red ty Be ees gible lo
4495 SW 35TH ST SUITE A ORLANDO FL 32811 US DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/01/1981 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 25 9-2130790 Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State Do Not WRITE IN THIS SPACE 5. Certificate of Status Desired Fee Required Trust Fund Contribution Added to Added to Added to Added to Personal Property Tax due June 30. Added to Personal Property Ta	pplicable littonal ired ly Be ees jible lo
SUITE A ORLANDO FL 32811 US 2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Mailing Address 2d. Ma	pplicable littonal ired ly Be ees jible lo
US US 3. Date Incorporated or Qualified 07/01/1981 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Appl Place of Status Desired Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Requ City & State Country Zip Country Added to Personal Property Tax due June 30. Personal Property Tax due June 30. Yes HAUGER, THERESIA S 5435 PASADENA DR ORLANDO FL 32809 83 Street Address (P.O. Box Number is Not Acceptable) 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 of 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 reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	pplicable littonal ired ly Be ees jible lo
2. Principal Place of Business 3. PS-2130790 3. Not / Sp-2130790 3. Country Status Desired Sp-25 Added to Fee Required Fee	pplicable littonal ired ly Be ees jible lo
2. Principal Place of Business 2. Mailing Address 59-2130790 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Requ City & State 28 Country 29 30 Country 8. This corporation owes or has paid the current year Intan Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent HAUGER, THERESIA S 5435 PASADENA DR ORLANDO FL 32809 81 Name Street Address (P.O. Box Number is Not Acceptable) 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 roffice 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 reagent. 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	pplicable littonal ired ly Be ees jible lo
21	pplicable littonal ired ly Be ees jible lo
Suite, Apt. #, etc. Suite, Apt. #, etc.	itional ired by Be ees jible lo
City & State Country Zip	red yy Be ees jible lo
Trust Fund Contribution Added to Zip Country Zip Country 8. This corporation owes or has paid the current year Inten 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent HAUGER, THERESIA S 5435 PASADENA DR ORLANDO FL 32809 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 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 reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	ees jible lo
Zip Country Zip Country S. This corporation owes or has paid the current year Intan Personal Property Tax due June 30. Yes S. Name and Address of Current Registered Agent S.	jible lo
24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent HAUGER, THERESIA S 5435 PASADENA DR ORLANDO FL 32809 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 86 87 87 88 88 89 80 80 80 80 81 82 83 84 84 85 86 86 87 87 88 88 89 80 80 80 80 80 80 80 80	de
9. Name and Address of Current Registered Agent HAUGER, THERESIA S 5435 PASADENA DR ORLANDO FL 32809 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Co 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 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 reagent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE	ie
HAUGER, THERESIA S 5435 PASADENA DR ORLANDO FL 32809 81 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Co 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 r 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 re agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	
5435 PASADENA DR ORLANDO FL 32809 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Co 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 redifice 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 reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	
ORLANDO FL 32809 83 84 City FL 85 Zip Co 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 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 reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	
83 84 City FL 85 Zip Co 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 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 reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	
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 roffice 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 reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	
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 roffice 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 reagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	
SIGNATURE	mina and
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	istered
	110
<u>. </u>	Addition
NAME HAUGER, THERESIA S 1.2 NAME	
STREET ADDRESS 5435 PASADENA DR 1.3 STREET ADDRESS	
CITY-ST-ZIP ORLANDO FL 14 CITY-ST-ZIP	
	Addition
NAME HAUGER, GUY F	
STREET ADDRESS 5435 PASADENA DR 2 3 STREET ADDRESS	
CITY-ST-ZIP ORLANDO FL 2 4 CITY-ST-ZIP	
THILE ☐ DELETE \$31THLE	_i Addition
NAME 32 NAME	
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-ST-ZIP 3.4. CITY-ST-ZIP	T Addition
TITLE DELETE 4.1 TITLE Change I	Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY - ST - ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change	Addition
NAME 5.2 NAME	
STREET ADDRESS 5.3 STREET ADDRESS 5	
GITY -ST-ZIP 5.4 CITY -ST-ZIP	
	Addition
NAME 6.2 NAME	
STREET ADDRESS 6 3 STREET ADDRESS	
City-St-ZIP 6.4 City-St-ZIP	
14. 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 infiniteled 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	ormation

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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, it pin an attachment with an address.

SIGNATURE:

WALKED REQUIRED

1/15/9-