2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Jun 15, 2007 8:00 am DOCUMENT # 701444 **Secretary of State** 06-15-2007 90021 036 ****65.25 LANARK VILLAGE TRAVELER'S, INC. Principal Place of Business Mailing Address LANARK VILLAGE TRAVELERS, INC LANARK VILLAGE TRAVELERS, INC. 155 HEFFERNAN AVENUE LANARK VILLAGE FL 32323-0414 PO BOX 414 LANARK VILLAGE FL 32323-0414 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-0931097 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **BOVE, MARY ANN** Street Address (P.O. Box Number is Not Acceptable) 126 ALABAMA ST CARRABELLE FL 32322 City 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. (NOTE Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution Due By May 1, 2007 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Delete TITLE Change Addition HILE NAME MUELLER, GARY NAMI STREET ADDRESS STREET ADDRESS 44 CARLTON AVE CHY S1-7/P CITY - ST - 7IP LANARK VILLAGE FL 32323 ☐ Delete ☐ Change TIFLE HOLE ■ Addition NAME NAME DIETZ, ROBERT STREET ADDRESS STREET ADDRESS 171 CARL KING AVENUE CITY - ST- ZIP CARRABELLE FL 32323-2119 CITY-S1-ZIP 100 ☐ Delete ши Change ☐ Addition NAMI NAME BOVE, MARY ANN STREET ADDRESS STREET ADDRESS 126 ALABAMA ST CITY ST-ZIP CITY - ST- 7(P CARRABELLE FL 32322 TITLE Delete HILE ☐ Change ☐ Addition NAME NAME DIETZ, CAROL STREET ADDRESS STREET ADDRESS 171 CARL KING AVENUE CITY ST-ZIP CITY-ST-ZIP CARRABELLE FL 32323-2119

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signalure 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 617, 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.

JHU

NAMI. STRUT ADDRESS

11111

NAME

CITY-ST-7IP

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

PETERSON, WILIAM

34-4 HOLLAND AVE

SEWELL, GENE

53-7 HEFFERNAN

LANARK VILLAGE FL 32323

LANARK VILLAGE FL 32323

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADORESS

CITY SI-ZIP

CHY-SI-7IP

IGNATURE AND TYPEDON PRINTED NAME OF SIGNING OFFICER OR DIRECTO

☐ Defete

☐ Delete

6-11-07

FILED

Dawma Drana K

Change

☐ Change

☐ Addition

Addition

ATTACHMENT

<u>40120815</u> # 701444

Sorry this is late was out in wrong PO BOX addedlate Charge.