

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F12087

1. Entity Name

CERTIFIED TOURS, INC.

FILED

Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90136 035 ***150.00

Principal Place of Business

Mailing Address

110 E BROWARD BLVD
P.O. BOX 1525
FT. LAUDERDALE FL 33301

110 E BROWARD BLVD
P.O. BOX 1525
FT. LAUDERDALE FL 33301-3503

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2074101

Applied For

Not Applicable

Zip

Country

Zip

Country

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

C/O TRIPP, SCOTT C
SMITH, DENNIS DUSTIN
110 SE 6TH STREET 28TH FLOOR
FT. LAUDERDALE FL 33301

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

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

(NOTE: Registered Agent signature required when reinstating)

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME EGAN, MICHAEL S
STREET ADDRESS 333 LAS OLAS BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL 33301

TITLE D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPT ☐ Delete
NAME ALLEN, CELESTE
STREET ADDRESS 110 BROWARD BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL 33301

TITLE T/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME MOONEY, JOHN T
STREET ADDRESS 110 EAST BROWARD BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL 33301

TITLE P/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME TRIPP, NORMAN D
STREET ADDRESS 110 S.E. 6TH STREET
CITY-ST-ZIP FT. LAUDERDALE FL 33301

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ASD ☐ Delete
NAME KELLY, WILLIAM H JR
STREET ADDRESS 55 EAST MONROE ST. STE. 4620
CITY-ST-ZIP CHICAGO IL 60603

TITLE D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME ARTHUR, ROSALIE V
STREET ADDRESS 333 EAST LAS OLAS BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL 33301

TITLE AS/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Signature of Norman D. Tripp
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/00
Date

954-357-4637
Daytime Phone #

CR2E034 (9/99)

943416

CERTIFIED TOURS, INC.
Document # F12087
2000 Uniform Business Report

EIN 59-2074101

Title	AT	Addition
Name	J. Stephen Nouss	
Street Address	110 E. Broward Blvd.	
City-St-Zip	Fort Lauderdale, FL 33301	

Title	AS	Addition
Name	Robin Segaul	
Street Address	110 E. Broward Blvd.	
City-St-Zip	Fort Lauderdale, FL 33301	

Title	VP	Addition
Name	John Hanratty	
Street Address	110 E. Broward Blvd.	
City-St-Zip	Fort Lauderdale, FL 33301	

Title	D	Addition
Name	Edward J. Morse	
Street Address	6363 NW 6 Way, Suite 400	
City-St-Zip	Fort Lauderdale, FL 33309	