SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750.)

APPROVED AND FILED

pg. 1 of 2

97 SEP 15 AM 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F95000005891 (5)**

1. Corporation Name
~~BLUE BORDER, INC.~~ McCRACKEN CORPORATION dba GLOBAL TRAVEL

Principal Place of Business
~~912 DAVIDSON DR~~
~~ROSWELL NM 88201~~

Mailing Address
~~912 DAVIDSON DR~~
~~ROSWELL NM 88201~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/30/1995
3a. Date of Last Report: 07/10/1996

2. Principal Place of Business
21 1680 AIRPORT BLVD Ste 900
22 Suite, Apt. #, etc. PENSACOLA,
23 City & State FLORIDA
24 Zip 32504 25 Country USA

2a. Mailing Address
26 1680 AIRPORT BLVD Ste 900
27 Suite, Apt. #, etc. PENSACOLA
28 City & State FLORIDA
29 Zip 32504 30 Country USA

4. FEI Number 85-0422901 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

900002297405--2
-09/18/97--01103--006
****165.00 ****165.00

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 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	MCCRACKEN, RICHALAN	1.2 NAME	
STREET ADDRESS	912 DAVIDSON DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	ROSWELL NM 88201	1.4 CITY-ST-ZIP	
TITLE	V ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MCCRACKEN, GARY W	2.2 NAME	
STREET ADDRESS	912 DAVIDSON DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	ROSWELL NM 88201	2.4 CITY-ST-ZIP	
TITLE	ST ☐ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME	MCCRACKEN, GARY W	3.2 NAME	
STREET ADDRESS	2705 MESA DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	FARMINGTON NM 88201	3.4 CITY-ST-ZIP	
TITLE	V ☐ DELETE	4.1 TITLE	☒ Change ☐ Addition
NAME	TURNER, ANNETTE	4.2 NAME	TURNER, ANNETTE G.
STREET ADDRESS	343 DEERPOINT DR	4.3 STREET ADDRESS	1600 EAST 34th ST.
CITY-ST-ZIP	GULF BREEZE FL 32561	4.4 CITY-ST-ZIP	PENSACOLA FL 32503
TITLE	V ☒ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	EASTHAM, PAULA	5.2 NAME	A. Agan 9/15/97
STREET ADDRESS	931 SPRING CREEK CIR	5.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32514	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☒ Addition
NAME	TURNER, PAUL	6.2 NAME	TURNER, PAUL J.
STREET ADDRESS		6.3 STREET ADDRESS	1600 EAST 34th ST.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	PENSACOLA, FL 32503

CR2E034 (4/97)

14. I do 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 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 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, or on an attachment with an address.

SIGNATURE: [illegible] 9-14-97 [illegible]

GLOBAL
TRAVEL

9-11-97

Fla Dept of State
Division of Corporations
PO Box 6327
Tallahassee, Fl 32314

Please be advised that the name and address were in error, Consequently, I did not receive the first notice. The second notice was recently forwarded. I called CT Corporation and also spoke with someone in the Division of Corporations who advised me to send original filing, fee & to request a waiver of penalty fees as this was unavoidable due to the lack of receipt of the first notice.

1680 AIRPORT BOULEVARD • SUITE 900 • PENSACOLA, FLORIDA 32504 • (904) 484-8333 • 1-800-277-7791

GLOBAL
TRAVEL

Paula Eatham has not been with the company since October 1996, but was responsible for the original filing & data.

I am in the process of correcting this with CT Corp — my registered agent so as not to have this problem in the future.

Please note the changes of address for McCracken Corporation d.b.a. Global Travel, deletion of Ms Eatham & addition of Paul T. Turner, as well as the change in our home address.

Thank you for your kind consideration in this matter.

Sincerely,

Annette D Turner

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