## 2000 UNIFORM BUSINESS REPORT (UBR)

of the corporation or the recei changed, or on an attachmen

SIGNATURE

## FILED **DOCUMENT # G77539** Feb 26, 2000 8:00 am **Secretary of State** TOPS 'N' TRAVEL, INC. 02-26-2000 90039 031 \*\*\*150.00 Mailing Address Principal Place of Business % BERT E. ROPER % BERT E. ROPER 120 SOUTH DILLARD STREET 120 SOUTH DILLARD STREET WINTER GARDEN FL 34787-3560 WINTER GARDEN FL 34787 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2344247 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent -Name ROPER, BERT E. Street Address (P.O. Box Number is Not Acceptable) 120 SOUTH DILLARD STREET WINTER GARDEN FL 34787 Zip Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. DP Change Addition C'12. | 1/1 | ☐ Delete TITLE ROPER, BARBARA C. NAME NAME STREET ADDRESS STREET ADDRESS 120 SOUTH DILLARD STREET CITY-ST-ZIP CITY-ST-ZIP WINTER GARDEN FL 34787 Change Addition ☐ Delete TITLE TITLE ROPER, BERT E. NAME NAME STREET ADDRESS 120 SOUTH DILLARD STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER GARDEN FL 34787 ☐ Change ☐ Addition ☐ Delete TITLE TITLE STAFFORD, REBECCA R NAME STREET ADDRESS STREET ADDRESS 120 SOUTH DILLARD STREET CITY-ST-7IP CITY-ST-ZIP WINTER GARDEN FL 34787 ☐ Change ☐ Addition AST Delete TITLE TITLE HALL, STACIA G NAME NAME STREET ADDRESS STREET ADDRESS 120 SOUTH DILLARD STREET CITY-ST-ZIP CITY-ST-ZIP WINTER GARDEN FL 34787 ☐ Addition ☐ Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of flustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

OF SIGNING OFFICER OR DIRECTOR