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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # G86807

(6)

THE TRAVEL CENTRE OF ORLANDO, INC.

Mailing Address

FILED
Apr 29 1997 8:00am
Secretary of State



WINTER PARK		7448 ALOMA AVENUE WINTER PARK FL 32792-9171							
						3. Date Incorporated or Qualified 03/01/1984	3a. Date (report
	ace of Business	26. Mailing Address				4. FEI Number	1 40/01/	7	pplied For
21	u	26				59-2439773 Not Applicable			
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required			
City & State)	City & State				6. Election Campaign Financing		\$5.00	May Be
Zip	Country	28 Zip	Cou	ntru		Trust Fund Contribution	<u>Ll</u>		to Fees
24	25	29	30	поу		8. This corporation has liability for it	ntangible tax Yes 🔲 N		. 199.032,
PT	9. Name and Address of Currer		130		·	10. Name and Address of New Rec			
NOR	DHEIM, SYLVIA			Bi	Name	,			
7448 ALOMA AVENUE					Constitution (D.C. D. Marian)				
WIN			82	Street Address (P.O. Box Number is Not Acceptable)					
			l	83					
				84	City		T _a	5 Zip	Code
···					•		- FL I		
 Pursuant t office or re 	o the provisions of Sections 607,050 poistered agent, or both, in the State	2 and 607.1508, Florida State of Florida, Such change was	ites, the at	ove	-named cor	poration submits this statement for the pration's board of directors. I hereby accep	urpose of chi	anging it	is registered
agent. I ar	n familiar with, and accept the obligi	ations of, Section 607.0505, F	lorida Stat	utes	·	morra board or directors. Thereby accept	т те арропі	moin as	registered
SIGNATURE									
12,	Signature, typed or printed name of registered age OFFICERS AN		11: Registered	Agai	nt signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	DECTOR	ID IN 10
TITLE	DP OF TOLKIO AN	DELFIE	1.1 10	II F		ADDITIONS/OFFICE		Change	Addition
NAME	NORDHEIM, SYLVIA		1,2 NA					Onlinge	
STREET ADDRESS	1781 CHIPPEWA TRAIL				ADDRESS				
CITY-ST-ZIP	MAITLAND FL		1.4 CI		- 1				
TITLE	D	DELETE	2.1 117		F71		· 🗌	Change	Addition
NAME	NORDHEIM, ROBERT 22		2.2 NA	MÉ				·	
STREET ADDRESS	1781 CHIPPEWA TRAIL		2.3 ST	REF1 /	ADDRESS				
CITY-ST-ZIP	MAITLAND FL		2 4 C	TY-S	1-ZIP	A^{\prime}			
TITLE	D	DELETE	3 1 1 MLE					Change	Addition
NAME	NORDHEIM, GREG		3 2 NA	ME	ŀ				
STREET ADDRESS	1781 CHAPPEWA TRAIL		3351	REFT A	ADDRESS				
CITY-ST-ZIP	MAITLAND FL		3 4. CI	TY-S	T-ZIP				
TITLE	0	□ DELETE	4.1 1(1	LE				Change	Addition
NAME	NORDHEIM, BRIAN		4. 2 N/	AME					
STREET ADDRESS	1781 CHIPPEWA TRAIL		4.3 \$1	REELA	ADDRESS				
CITY-ST-ZIP	MAITLAND FL	Drieze	4.4 CIT		- 7IP				
TITLE	D D	☐ DELETE	5.1 TFT				L	Change	☐ Addition
NAME	NORDHEIM, ERIC		5.2 NA						
STREET ADDRESS	1781 CHIPPEWA TRAIL				ADDRESS				
CITY-ST-ZIP TITLE	MATLAND FL	DELETE	5.4 CIT		- ZIP		····	Char	1 4 4 4 7 7 1
NAME		∟ DELETE	6.1 7(1				LJ	Change	☐ Addition
STREET ADDRESS			G.2 NA		DDDEEG				
	•				ADDRESS				
14. I do hereb	v certify that the information supplier	with this filing does not gua	6.4 CII lify for the i	OVOE	notion state	d in Section 119.07(3)(i), Florida Statutes	I further ee	tify that	the
Intormation	t indicated on this annual report or s	upplomental annual report is the receiver or trustee empo	true and a wered to e	COLU	rate and tha	t my signature shall have the same legal rt as required by Chapter 607, Florida St	official ac if a	anda un	dar nath, that