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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G86807

(6)

FILED
Mar 16 1998 8:00am
Secretary of State

THE TRAVEL CENTRE OF ORLANDO, INC. Principal Place of Business Mailing Address 7448 ALOMA AVENUE 7448 ALOMA AVENUE WINTER PARK FL 32792 WINTER PARK FL 32792 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/01/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2439773 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zψ Country This corporation owes or has paid the current year Intangible 25 Z Yes 29 Personal Property Tax due June 30. 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 NORDHEIM, SYLVIA 7448 ALOMA AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 WINTER PARK FL 32792 83 Zip Code 84 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 111006 NORDHEIM. SYLVIA NAME 1.2 NAME 1781 CHIPPEWA TRAIL STREET ADDRESS 1.3 STREET ADDRESS MAITLAND FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Channe Addition TITLE 21 TOLE NORDHEIM, ROBERT NAME 22 NAME 1781 CHIPPEWA TRAIL STREET ADORESS 2.3 STREET ADDRESS MAITLAND FL CITY-ST-2IP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE NORDHEIM, GREG NAME 3.2 NAME 1781 CHAPPEWA TRAIL STREET ADDRESS 3.3 STREET ADDRESS MAITLAND FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NORDHEIM, BRIAN NAME 4. 2 NAME 1781 CHIPPEWA TRAIL STREET ADDRESS 4.3 STREET ADDRESS MATLAND FL CITY - S1 - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 51 TITLE NORDHEIM, ERIC 5.2 NAME 1781 CHIPPEWA TRAIL STREET ADDRESS 5.3 STREET ADDRESS MAITLAND FL CITY - ST - ZIP 5.4 CITY - ST - ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 DITY-ST-7IP CITY-ST-ZIP

14. Thereby 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 arrival report or supplemental arrival 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 correction or the receiver or trustee empower 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:

Ilun Torden Mac 10-98

CR2E034 (10/97)