

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT

1995



OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA
32399-0001

APPROVED
AND
FILED

DOCUMENT # H01318

(5)

50 MAY 10 AM 10:25

IRIS TRAVEL, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

153 E NEW ENGLAND AVE
WINTER PARK FL 32789

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WINTER PARK FL 32789

PLEASE WRITE IN THIS SPACE

3. Date incorporated or qualified 04/20/1984	3a. Date of last report 05/01/1994
4. FEI Number 59-2412191	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. The corporation has liability for intangible tax under S. 193.032 Florida Statutes ☒ Yes ☐ No	

21. 153 E New England	26. (Same)
22. Winter Park, FL	27. State of Florida
23. 32789	28. City & State
24. 32789	25. U.S.
29. 30	30. 30

9. Name and Address of Current Registered Agent

MAY, NANCY
4464 PHEASANT RUN DR.
ORLANDO FL 32808

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	FL

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 607.0507, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent/Secretary

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	P TAPLEY, IRIS 2650 GOLFRIDGE APOPKA FL	1. NAME	☐ Change ☐ Addition
STREET ADDRESS		1. STREET ADDRESS	
CITY, STATE, ZIP		1. CITY, STATE, ZIP	☐ Change ☐ Addition
NAME	V MAY, NANCY 1429 39TH ST VERO BCH. FL	2. NAME	
STREET ADDRESS		2. STREET ADDRESS	
CITY, STATE, ZIP		2. CITY, STATE, ZIP	☐ Change ☐ Addition
NAME		3. NAME	
STREET ADDRESS		3. STREET ADDRESS	
CITY, STATE, ZIP		3. CITY, STATE, ZIP	☐ Change ☐ Addition
NAME		4. NAME	
STREET ADDRESS		4. STREET ADDRESS	
CITY, STATE, ZIP		4. CITY, STATE, ZIP	☐ Change ☐ Addition
NAME		5. NAME	
STREET ADDRESS		5. STREET ADDRESS	
CITY, STATE, ZIP		5. CITY, STATE, ZIP	☐ Change ☐ Addition
NAME		6. NAME	
STREET ADDRESS		6. STREET ADDRESS	
CITY, STATE, ZIP		6. CITY, STATE, ZIP	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is substantially true and correct and that I am duly qualified for the position stated in this filing. I further certify that the information supplied 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 a citizen or resident of this corporation or the person or persons empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing. If changed, or newly added, list with an address.

SIGNATURE:

Iris B. Tapley
SIGNATURE AND TYPED OR PRINTED NAME OF HOLDING OFFICER OR DIRECTOR

4/31/95/407-628-8316
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