2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # H24084 Jul 31, 2000 8:00 am 1. Entity Name Secrétary of State EDUCATIONAL TRAVEL SERVICES, INC. 07-31-2000 90013 003 ***550.00 Principal Place of Business Mailing Address 5725 IMPERIAL LAKES BLVD. (33860) 5725 IMPERIAL LAKES BLVD. (33860) PO BOX 6929 PO BOX 6929 MULBERRY FL 33807 MULBERRY FL 33807 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2456977 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Robert S. Bolt RIDGWAY JR., RICHARD H. Street Address (P.O. Box Number is Not Acceptable) 5725 IMPERIAL LAKES BLVD. 601 Bayshore Blvd., Suite 700 MULBERRY FL 33860 City Tampa 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, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE Change ☐ Delete TITLE RIDGWAY JR., RICHARD H. NAME NAME STREET ADDRESS 5230 CHARLES LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF LAKELAND FL Change ☐ Addition VS. €_-Delete TITLE RIDGWAY, JAMES E JR James E. Ridgway, Jr. NAME NAME STREET ADDRESS 4745 TIERRA ALTA CT. STREET ADDRESS 4745 Tierra Alta Court CITY-ST-ZIP Lakeland, FL 33813 CITY-ST-ZIP Lakeland fl ☐ Change Addition Delete TITLE TITLE RIDGWAY, JAMES E NAME Deborah Ridgway NAME STREET ADDRESS 4733 TIERRA ALTA CT. STREET ADDRESS P.O. Box 2710 CITY-ST-ZIP LAKELAND FL CITY-ST-ZIP Brandon, FL 33509 Addition TITLE Change TITLE Delete E Timothy F. Brown NAME STREET ADDRESS STREET ADDRESS 845 Pinecrest Drive CITY-ST-ZIP CITY-ST-ZIP Bartow, FL 33830 TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JUNE STORE OF STORE O

7-17-00

363-644-2456

Daytime Phone #