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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

Aug 01 1997 8:00am

Secretary of State

0,26,62 86

ii Corporation	COUNT TRAVEL SHOPPE, IN	(5) C.					(10)
Principal Place	e of Business	Mailing Address					
11721 NORTH DALE MABRY HIGHWAY TAMPA FL 33618		RD 1. BOX 18 GLENROCK PA 17327-9704 US					
_					3. Date incorporated or Qualified 09/06/1985	3a. Date of Las 05/01/199	,
Principal Place of Business 21		2a. Mailing Address		4. FET Number		Applied For	
Suite, Apt. #, atc.		Suite, Apt. #, etc.		59-2574307	<u></u> □ \$8.7	Not Applicable 5 Additional	
22		27		5. Certificate of Status Desired	T	Required	
City & State		City & State			6. Election Campaign Financing		00 May Be
23 Zip	Country	28 7ip	Country		Trust Fund Contribution 8. This corporation has liability for		ed to Fees
24	25		30		Florida Statutes	X Yes No	# 6. 189.002,
	9, Name and Address of Current	X	81	Name	10. Name and Address of New Re	gistered Agent	
	MER, HABER, MCDONALD & LEVI I N. CHURCH AVENUE	NE, P.A.					
	PA FL 33607-2495		82	Street Add	ress (P.O. Box Number is Not Acceptat	ole)	
			83	* *************************************			
			84	City		FL 85 2	'ıp Code
11. Pursuant I	to the provisions of Sections 607.0502 ogstered agent, or both, in the State of	and 607.1508, Florida Statute Florida: Such change was a	ll s, the above ulhorized by	named con the corpora	poration submits this statement for the pition's board of directors. I hereby acce		g its registered
	m familiar with, and accept the obligati	ons of, Section 607.0505, Flo	rida Statutos	,	,		9
SIGNATURE	Signature, typest or printed manie of registerest agent.	arditate Mapplicable (NOTE	Begistered Age	nt signature reou	ind when renstating)	DAII	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE NAME	STOKES, MICHELE E		1.1 101.8			L_J Chang	ge L Addition
STREET ADDRESS	RD1 BOX 19, 19 ROSER ROAD		1.2 NAME 1.3 STRELT ADDRESS 1.4 CITY - ST - 7 IP				
CITY-ST-ZIP	GLENROCK PA 17327						
TITLE	V DELETE		2 1 TITLE			Chang	ge Addition
NAME	ABBOTT, THOMAS		2.2 NAME				
STREET ADDRESS	11721 N. DALE MABRY		23 STHEET	1			
CITY-ST-ZIP TITLE	TAMPA FL 33618 ST	DELFIE	2 4 CHY-SY-ZIP 3 1 THUE			Chang	ne Addition
NAME	STOKES, STANLEY		3.2 NAME				jo
STREET ADDRESS	RD1 BOX 19, 19 ROSER ROAD		3.3 \$18661	ADDRESS			
CITY-ST-ZIP	GLENROCK PA 17327		3 4. C(1) Y - S1 - 7(P				
TIFLE	ן מנודונ		4.1 THUE			LJ Chang	ge L Addition
NAME STREET ADDRESS			4. 2 NAME 4.3 STREET	ADDOC CC			
CITY-ST-ZIP			4.3 SINEET I				
Tillif	DELETE		5 1 1HLE			Chang	ge 🔲 Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE 1	ADDRESS			
CITY - ST - ZIP	Prince		5.4 CITY - ST - ZIP			F10	no Auduma-
TITLE NAME	☐ DELETE		G.1 TITLE G.2 NAME			[] Chang	ge LAddition
STREET ADDRESS			6.3 STREET	ADDRI 99			
CITY-ST-ZIP			6.4 CITY - ST				
14. I do hereb	y certify that the information supplied with indicated on this annual report or supplied or the corporation or the Block 12 or Block 13 if change (1) or o	with this filmy does not qualify pplemental annual report is yr o receiver of trustee emplowen n an attachingrit with an aco	dor the exer	notion stater	d in Section 119.07(3)(i), Florida Statute I my signature shall have the same loga rt as required by Chapter 607, Florida S	s. I further certify the service of	nal the uncter eath; that ny name