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

CITY-ST-ZIP

officer or director of the corpora Block 12 or Block 13 if changed

**FILED PROFIT** Apr 28 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS **19**98 DOCUMENT # J44393 (3)TICKET TO ADVENTURE, INC. Principal Place of Business Mailing Address 748 14TH AVE NE PO BOX 41005 ST. PETERSBURG FL 33701 ST. PETERSBURG FL 33743 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/01/1986 2a. Mailing Address Applied For 26 59-2740316 Not Applicable Suite, Apt #, etc. \$8.75 Additional 5, Certificate of Status Desired 27 Fee Regulred City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 MILLER, MARY FALLON 746 14TH AVE NE 82 Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33701 83 City 84 Zip Code 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 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title it applicable. (NO16: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE ☐ Change NAME MILLER, MARY FALLON 12 NAME 746 14TH AVE NE STREET ADDRESS 1.3 STREET ADDRESS **\$T. PETERSBURG FL** CITY-ST-ZIP 14 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change ☐ Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME **3.2 NAME** STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change TITLE Addition 6.1 THILE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. 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 annual copyr or 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 annual copyr or 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 annual copyr or 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 annual copyr or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information Indicated on this annual copyr or supplied with this filing does not accurate and that my signature shall have the same legal effect as if made under oath; that I am an out of the same legal effect as if made under oath; that I am an out of the same legal effect as if made under oath; that I am an out of the same legal effect as if made under oath; that I am an out of the same legal effect as if made under oath; that I am an out of the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the sa

cue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an Powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

MARY FALLOW MILLER 4/20/48 8/3 822 15/5