

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 09, 2000 8:00 am**
Secretary of State

03-09-2000 90081 001 *****8.75

03-09-2000 90081 002 ***150.00

DOCUMENT # J58647

1. Entity Name

ADVENTURES UNLIMITED TRAVEL, INC.

Principal Place of Business

Mailing Address

-- **DAWN ELAINE TALBOT**
SW MONTERY ROAD, SUITE 62
FL 34994**% DAWN ELAINE TALBOT**
49 SW MONTERY RD STE 62
STUART FL 34994-4650
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2780512**

Applied For

Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional**
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****TALBOT, DAWN ELAINE**
49 SW MONTERY ROAD, SUITE 62
SUITE 7
STUART FL 34994

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
☐ Delete	P. NUNN, RICHARD R.	☐ Change ☐ Addition	
STREET ADDRESS	4311 SE GENEVA DRIVE	STREET ADDRESS	
CITY-ST-ZIP	STUART FL	CITY-ST-ZIP	
☐ Delete	ST TALBOT, DAWN ELAINE	☐ Change ☐ Addition	
STREET ADDRESS	4311 SE GENEVA DRIVE	STREET ADDRESS	
CITY-ST-ZIP	STUART FL	CITY-ST-ZIP	
☐ Delete	V NUNN, PEGGY A.	☐ Change ☐ Addition	
STREET ADDRESS	4311 SE GENEVA DRIVE	STREET ADDRESS	
CITY-ST-ZIP	STUART FL	CITY-ST-ZIP	
☐ Delete		☐ Change ☐ Addition	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
☐ Delete		☐ Change ☐ Addition	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
☐ Delete		☐ Change ☐ Addition	
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAWN ELAINE TALBOT**1/14/00**

Date

561-286-0777

Daytime Phone #

CR2E034 (9/99)