

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

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**APPROVED  
AND  
FILED**

95 MAY 12 AM 9: 21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # K57385 (2)**

1. Corporation Name  
**TRAVEL MANAGEMENT INCORPORATED**

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address  
1232 AIRPORT RD. N. NAPLES FL 33942-4355 US  
1232 AIRPORT RD N. NAPLES FL 33942 US

3. Date Incorporated or Qualified **01/09/1989** 3a. Date of Last Report **06/03/1994**  
4. FEI Number **65-0069779** 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. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 26  
22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.  
23 City & State 28 City & State  
24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent  
**BARKSDALE, SALLY B.  
620 14TH AVE S  
NAPLES FL 33940**

10. Name and Address of New Registered Agent  
81 Name **Andrew Barksdale**  
82 Street Address (P.O. Box Number is Not Acceptable) **1232 Airport Rd. North**  
83  
84 City **Naples** FL 85 Zip Code **33942**

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 responsibility for, the provisions of Section 607.1505, Florida Statutes.  
SIGNATURE *Andrew Barksdale, Pres.* **Andrew Barksdale, Pres.** **5/6/95**  
Signature (Print or printed name of registered agent and title, if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS  
TITLE **DP**  
NAME **BARKSDALE, ANDREW B.**  
STREET ADDRESS **4570 GAIL BLVD**  
CITY - ST - ZIP **NAPLES FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
11 TITLE  Change  Addition  
12 NAME **P/IN/T/S Andrew Barksdale**  
13 STREET ADDRESS **1232 Airport Rd. N**  
14 CITY - ST - ZIP **Naples, FL 33942**  
21 TITLE  Change  Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP  
31 TITLE  Change  Addition  
32 NAME **700001489747**  
33 STREET ADDRESS **-05/17/95--01011--004**  
34 CITY - ST - ZIP **\*\*\*\*225.00 \*\*\*\*225.00**  
41 TITLE  
42 NAME  
43 STREET ADDRESS **5/12/95 us**  
44 CITY - ST - ZIP  
51 TITLE  Change  Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP  
61 TITLE  Change  Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

14. I do hereby certify that the information provided with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or on the prior annual 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 individual being empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.  
SIGNATURE: *Andrew Barksdale, President* **Andrew Barksdale, President** **5/6/95** **813-643-6666**  
Signature and typed or printed name of signing officer or director Date Telephone #