SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
95 JUL 21 PM 12: 22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # K61241 (1)

1. Corporation Name
AZINGER WAY TRAVEL, INC.

Principal Place of Business	Mailing Address
5455 FRUITVILLE ROAD 5961 CATTLEMAN LANE SARASOTA FL 34233	5455 FRUITVILLE ROAD 5961 CATTLEMAN LANE SARASOTA FL 34233

3. Date Incorporated or Qualified: 01/25/1989
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business: 21 5455 FRUITVILLE RD.
Suite, Apt. #, etc: 22
City & State: 23 SARASOTA FL
Zip: 24 34232 County: 25 SARASOTA

2a. Mailing Address: 26 5455 FRUITVILLE RD.
Suite, Apt. #, etc: 27
City & State: 28 SARASOTA FL
Zip: 29 34232 Country: 30 SARASOTA

4. FEI Number: 65-0094268 ☐ 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

9. **Name and Address of Current Registered Agent**
COWDEN, KARAN W
5455 FRUITVILLE RD
SARASOTA FL 34232

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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 Karan W. Cowden KARAN W. COWDEN DIRECTOR 7-17-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	AZINGER, PAUL W.	1.2 NAME	
STREET ADDRESS	5455 FRUITVILLE RD	1.3 STREET ADDRESS	
CITY ST ZIP	SARASOTA FL	1.4 CITY ST ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	AZINGER, RALPH	2.2 NAME	
STREET ADDRESS	5455 FRUITVILLE RD	2.3 STREET ADDRESS	
CITY ST ZIP	SARASOTA FL	2.4 CITY ST ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	COWDEN, KARAN	3.2 NAME	
STREET ADDRESS	5455 FRUITVILLE RD	3.3 STREET ADDRESS	
CITY ST ZIP	SARASOTA FL	3.4 CITY ST ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST ZIP		6.4 CITY ST ZIP	

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 report or supplemental 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 receiver or trustee 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 on an attachment with an address.

SIGNATURE: Karan W. Cowden KARAN W. COWDEN DIRECTOR 7-17-95 813-378-9872
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0110213 CP