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Feb 12 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham,
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L86493 (8)

1. Corporation Name
BAY AREA TRAVEL, INC.

Principal Place of Business

2909 BAY TO BAY BLVD
SUITE 109
TAMPA FL 33629
US

Mailing Address

2909 BAY TO BAY BLVD
SUITE 109
TAMPA FL 33629-8162
US

3. Date Incorporated or Qualified

07/06/1990

3a. Date of Last Report

09/20/1996

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

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9. Name and Address of Current Registered Agent

REMO, ARMANDO G JR
8706 MAPLE LAKE PLACE
TAMPA FL 33635

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD ☐ DELETENAME KNOPKE, WILLIAM C II
STREET ADDRESS 2909 BAY TO BAY BLVD 109
CITY - ST - ZIP TAMPA FLTITLE DP ☐ DELETENAME LEE, BRAIN M
STREET ADDRESS 2909 BAY TO BAY BLVD 109
CITY - ST - ZIP TAMPA FLTITLE D ☐ DELETENAME KNOPKE, WILLIAM C SR
STREET ADDRESS 2909 BAY TO BAY BLVD 109
CITY - ST - ZIP TAMPA FLTITLE S ☐ DELETENAME REMO, ARMANDO G
STREET ADDRESS 2909 BAY TO BAY BLVD 109
CITY - ST - ZIP TAMPA FLTITLE ~~D~~ ☐ DELETENAME ~~DOWTHITT, AMY L~~
STREET ADDRESS ~~2909 Bay to Bay Blvd Suite 109~~
CITY - ST - ZIP ~~Tampa FL~~TITLE ☐ DELETENAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

DOWTHITT, AMY L
2909 Bay to Bay Blvd Suite 109
TAMPA FL 33629

14. I do 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 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:

SIGNATURE REQUIRED ARMANDO G. REMO, JR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/5/97 839405

CR2E034 (9/96)