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

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	M38886

(1)

Corporation Name

RENAISSANCE TRAVEL, INC.

Principal Place o	of Business	Mailing Add	ress			1 100 100 11 100 1110	. 18161 (418) (81		B.B.1 41611 41613 61611 1861
< 828 NEAPOLIT 301 NAPLES FL 33		301 Naples F	OLITAN WAY						
US		US				3. Date incorporated 09/23/1986	or Qualified		e of Last Report 5/01/1995
	Por Deapoliton	1 2a. Mailing /	8 Neardit	ar	(Nay	4. FEI Number 59-272336	4		Applied For Not Applicable
Suite, Apt #. 2	etc.	Suite, Ap	ot. #, etc.			5. Certificate of Statu	s Desired	9	\$8.75 Additional Fee Required
City & State		City & Si 28	tale			6. Election Campaign Trust Fund Contrib	_	Ď	\$5.00 May Be Added to Fees
Ζφ 4	Country 25	Zip 29	30	untry	•	This corporation h Florida Statutes		tangible ta	ax unders 199.032,
	9. Name and Address of Cur	rent Registered Ag	ent			10. Name and Addre	ss of New F	Registered	Agent
LATONA.	RANDALL J.			81	Name				
828 NEAL	POLITAN WAY			82	838 lres	SS (P.O. Box Number is	Not Acceptate)av	
SUITE 301 NAPLES FL 33940		83			•				
				84				FL	85 Zip Code
Pursuant to	the provisions of Sections 607.0	502 and 607.1508, F	lorida Statutes, the abo	ove⊸n	named corporat	ion submits this stateme	ent for the pu	rpose of ch	anging 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.

	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	RANDALL J. OLITAN WAY, STE 301 L	1 1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP	838 Neapolitan Way # 301
LATONA, I ELATONA, I ELATONA, I 828 NEAP NAPLES F	OLITAN WAY	2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - SI - ZIP	838 Neapolitan Way #301
E EL ADORESS	☐ DELETE	3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS	☐ Change ☐ Additio
LADORESS	DELETE	3 4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	☐ Change ☐ Addition
ST ZIP	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	☐ Change ☐ Additio
ST ZP	☐ DETEJE	5.4 City-St-ZiP 6.1 Title 6.2 Name 6.3 Street Address	☐ Change ☐ Addition

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)(k), 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 only, that I am an officer or director of this comporation 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 chapted, or of an attachment with an address.

SIGNATURE:

CR2E034 (12/95)