

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M71118

1. Entity Name

GRAY AND ASSOCIATES TRAVEL, INC.

FILED

May 12, 2000 8:00 am
Secretary of State

05-12-2000 90041 030 ***150.00

Principal Place of Business

Mailing Address

3845 WOOLBRIGHT RD
SUITE 12
BOYNTON BEACH FL 33436
US

3845 WOOLBRIGHT RD
SUITE 12
BOYNTON BEACH FL 33436-7207
US

2. Principal Place of Business

11054 S. MILITARY TRAIL

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

BOYNTON BEACH

City & State

City & State

City & State

FL.

Zip

33436

Country

USA

Zip

Country

4. FEI Number

65-0025747

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

DEL CAMINO GRAY, MARIA
943 GARDENIA DR
DELRAY BEACH FL 33483

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 State

10. 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

TITLE D ☐ Delete
NAME GRAY, CHRISTOPHER H.
STREET ADDRESS 3845 WOOLBRIGHT RD S-12
CITY-ST-ZIP BOYNTON BEACH FL 33436

TITLE D ☐ Delete
NAME GRAY, MARIA DEL CAMINO
STREET ADDRESS 3845 WOOLBRIGHT RD S-12
CITY-ST-ZIP BOYNTON BEACH FL 33436

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME 11054 S. MILITARY TRAIL
STREET ADDRESS BOYNTON BEACH, FL 33436
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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: CHRISTOPHER H. GRAY 4/27/00 (561) 732-0605
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)