2002 UNIFORM BUSINESS REPORT (UBR)

Jan 14, 2002 8:00 am DOCUMENT # N0000005222 Secretary of State CHOICE DESTINATIONS, INC. 01-14-2002 90031 039 ****61.25 Principal Place of Business Mailing Address 10152 CHERRY HILLS AVE. CIR. 10152 CHERRY HILLS AVE. CIR. BRADENTON FL 34202 **BRADENTON FL 34202** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-1009497 Not Applicable Zip Ζip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) CHERRY, MARGARET H 10152 CHERRY HILLS AVE. CIR. **BRADENTON FL 34202** Zip Code FL 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. (NQTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Ď. FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ED#: 0 ☐ Addition ☐ Change TITLE ☐ Delete TITLE CHERRY, MARION L NAME NAMÈ 10152 CHERRY HILLS AVE CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34202** CITY-ST-ZIP AD ☐ Addition ☐ Delete TITLE Change TITLE CHERRY, MARGARET H NAME NAME 10152 CHERRY HILLS AVE CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34202** COD ☐ Addition ☐ Change ☐ Delete TITLE TITLE ROBISON, LOUIS -NAME NAME 3808 FISHING TRAIL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Sarasota FL 34235 CITY-ST-ZIE PD TITLE ☐ Change ☐ Addition TITLE ☐ Delete ATKINS, FREDD NAME NAME STREET ADDRESS **1598 29TH STREET** STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34234 CITY-ST-ZIP ☐ Addition ☐ Defete ☐ Change TITLE TITLE HAYNES, ROBBIN NAME NAME 1847 32ND STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34234 CITY-ST-ZIP Addition, TITLE TITLE ☐ Change ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 eath; that I am an officer or director of the corporation or the receiver or trustee encouraged or consequent with all other like empropered. Or on an attackment with all other like empropered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/02

941-358-7392

FILED

Daytime Phone #

CR2E037 (9/01)