2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02000008206

1. Entity Name

FLORIDA BUSINESS TRAVEL ASSOCIATION, INC.



FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90054 026 ****61.25

Principal Place of Business		Mailing Address .							
7154 N UNIVERSITY DR #299 TAMARAC FL 33321		7154 N UNIVERSITY DR #299 TAMARAC FL 33321			90006925				
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2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number	4. FEI Number O9 -562 4977 Applied For Not Applicable			
Zip	Country			ntry	5. Certificate of St	5. Certificate of Status Desired See Required Fee Required			
	6. Name and Address of Current	Registered Agent			7. Name and Add	ress of New Registered	•	-	
				Name			- 		
MORRIS		· · · · · · · · · · · · · · · · · · ·	Street Address		ss (P.O. Box Number is N	Not Accentable)			
7154 N	UNIVERSITY DR #299			order Address (1.0. box Number is Not Acceptable)					
TAMARA	C FL 33321								
ţ	i		ľ	City	N and	FL	Zip Cod	de	
8. The above	e named entity submits this statement for	r the purpose of changing its	registere	d office or regis	stered agent or both in		- 1		
the obliga	tions of registered agent.	the perpose of ondriging to	registerer	a office of region	stered agent, or both, in	me state of Florida. Tam	iamiliar with,	and accept	
SIGNATURE					÷-				
	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	: Registered	Agent signature requ	uired when reinstating)	DATE			
		The second secon		J	=		***		
	FILE NOW: FEE IS \$61.25	9. Election Carr	naign Eir	nancing	ØE 00	Males Ohne			
	FILE NOW: FEE 15 \$01.25				\$5.00 May Be	Make Chec	k Payable	τφ	
	FILE NOW. FEE 13 \$01.23	Trust-Fund Co			Added to Fees	Florida Depar	k Payable tment of	State	
10.		Trust-Fund Co	ontributio		Added to Fees	Florida Depar	rtment of	State	
	OFFICERS AND DIR	Trust-Fund Co	ontributio		Added to Fees	Florida Depar	RECTORS IN	State	
10.	OFFICERS AND DIR	Trust-Fund Co	ontributio		Added to Fees	Florida Depar	rtment of	State	
10.	OFFICERS AND DIR	Trust-Fund Co	11. TITLE NAME		Added to Fees	Florida Depar	RECTORS IN	State	
10. TITLE NAME	OFFICERS AND DIR DT MORRIS, LYNN	Trust-Fund Co	11. TITLE NAME	ADDRESS	Added to Fees	Florida Depar	RECTORS IN	State	
10. TITLE NAME STREET ADDRESS	OFFICERS AND DIR DT Morris, Lynn 7154 N University DR #299	Trust-Fund Co	11. TITLE NAME STREET CITY-S	ADDRESS	Added to Fees	Florida Depar	RECTORS IN Change	State	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIR DT MORRIS, LYNN 7154 N UNIVERSITY DR #299 TAMARAC FL 33321	Trust-Fund Co	11. TITLE NAME STREET	ADDRESS	Added to Fees	Florida Depar	RECTORS IN	State	
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12. I hereby certify that the information supplied with this filling 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

1-14-03 954-926-0692