

2001 UNIFORM BUSINESS REPORT (UBR)

4/3/04/3

FILED
May 24, 2001 8:00 am
Secretary of State

04-03-2001 90010 009 ***150.00

DOCUMENT # P00000099520

1. Entity Name

TARPON SPRINGS AWESOME TOURS, INC.

Principal Place of Business

1028 PENINSULAR AVE
 TARPON SPRINGS FL 34689

Mailing Address

PO BOX 787
 TARPON SPRINGS FL 34689

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3678483

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HUBBARD, JOHN G
595 MAIN STREET
DUNEDIN FL 34698

7. Name and Address of New Registered Agent

Name **BEVERLEY BILLIERS**

Street Address (P.O. Box Number is Not Acceptable)

1028 Peninsular Ave

City **Tarpon Springs**

FL

Zip Code **34689**

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: Page must be signed and dated when returning)

DATE

3/27/01

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, 2001 Fee will be \$550.00
Makes Check Payable to: Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PRES.** ☐ Delete
 NAME **BEVERLEY Billiers**
 STREET ADDRESS **1028 PENINSULAR AVE**
 CITY-ST-ZIP **TARPON SPRINGS FL 34689**

TITLE **VICE PRESIDENT** ☒ Delete
 NAME **DIANA Forgione**
 STREET ADDRESS **4204 PRODO LANE**
 CITY-ST-ZIP **NEW PORT RICHEY FL 34655**

TITLE **SECRETARY** ☐ Delete
 NAME **DONNA HOFFMAN**
 STREET ADDRESS **12520 GOLDEROD ST**
 CITY-ST-ZIP **NEW PORT RICHEY FL 34654-4208**

TITLE **TREASURER** ☐ Delete
 NAME **ROSA SHEROUSE**
 STREET ADDRESS **300 S. FLORIDA AVE #600F**
 CITY-ST-ZIP **TARPON SPRINGS FL 34689**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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 NAME
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 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:

BEVERLEY Billiers **3/27/01** **727-939-0447**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Phone #

CR2E034 (10/00)