

FILED
Jun 02, 2003 8:00 am
Secretary of State

06-02-2003 90189 008 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000050964			
1. Entity Name TALKING TOURISM, INC.			
Principal Place of Business 115 CORAL CAY DRIVE PALM BEACH GARDENS, FL 33418		Mailing Address 115 CORAL CAY DRIVE PALM BEACH GARDENS, FL 33418	
2. Principal Place of Business		3. Mailing Address <i>146 Thornton Dr</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State <i>PBG FL</i>	
Zip		Zip <i>33418</i>	
Country		Country <i>Palm Beach</i>	
4. FID Number <i>72-1528584</i>		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WRIGHT, COLIN 115 CORAL CAY DRIVE PALM BEACH GARDENS, FL 33418		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____			
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P WRIGHT, COLIN 115 CORAL CAY DRIVE PALM BEACH GARDENS, FL 33418 CITY-ST-ZIP	TITLE	☐ Delete ☐ Change ☐ Addition
TITLE	T MATHIS, DON 146 THORNTON DRIVE PALM BEACH GARDENS, FL 33418 CITY-ST-ZIP	TITLE	☐ Delete ☐ Change ☐ Addition
TITLE	S CONNELL, JIM 8630 SW 94TH STREET MIAMI, FL 33516 CITY-ST-ZIP	TITLE	☒ Delete ☐ Change ☐ Addition
TITLE	☐ Delete	TITLE	☐ Delete ☐ Change ☐ Addition
TITLE	☐ Delete	TITLE	☐ Delete ☐ Change ☐ Addition
TITLE	☐ Delete	TITLE	☐ Delete ☐ Change ☐ Addition
TITLE	☐ Delete	TITLE	☐ Delete ☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Donald B Mathis</i>		5/30 561625.3900	
SIGNATURE AND TYPED OR PRINTED NAME OF JUDICIAL OFFICER OR DIRECTOR		Date	

90138393



☒ CHECK HERE IF MAKING CHANGES

CR20034 (10/02)

Attachment

90138393

902000050964

5/30/03

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Dear sir:

This corporation was established May 2002. It has not been active until just this month. We did not receive any paperwork with regards to filing this Uniform Business Report and have just become aware of it. Please waive the \$550.00 fee for late filing and accept our check for \$150.00 as payment for filing.

Thank you
Don Mathis
146 Thornton Dr
Palm Beach Gardens, FL 33418