

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P04568** (2)

1. Corporation Name: **GREAT NOTCH TRAVEL & CRUISES INC.**

Principal Place of Business

Mailing Address

**150 CLOVE RD.
LITTLE FALLS NJ 07424**

**150 CLOVE RD.
LITTLE FALLS NJ 07424-2138**



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

9. Name and Address of Current Registered Agent

**HAEMMERLE, EUGENE M.
1290 FOXFIRE LANE
NAPLES FL 33942**

3. Date Incorporated or Qualified

3a. Date of Last Report

12/31/1994

02/15/1996

4. FET Number

22-2251154

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0102 and 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment of registered agent. I am familiar with and accept the provisions of Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent required when reinstating)

(NOTE: Registered Agent signature required when reinstating)

DATE

11/21/97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**PD
HAEMMERLE, EUGENE
1290 FOXFIRE LANE
NAPLES FL**

TITLE ☒ DELETE

**VTD
HAEMMERLE, KAREN
1290 FOXFIRE LANE
NAPLES FL**

TITLE ☐ DELETE

**SD + VTD
HAEMMERLE, HELENE
4E AARON BURR COURT
CRANBURY NJ**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 its receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or attached as an attachment with an address.

SIGNATURE:

(Signature and Typed or Printed Name of Signing Officer or Director)

Date

Daytime Phone #

CR2E034 (9/96)