## 709/15/99: \$550 (IF DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.

ATION REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Aug 03, 1999 8:00 am Secretary of State 08-03-1999 90001 037 \*\*\*550.00

Corporation Name # P347
VIRGIN LIGHTSHIPS, INC.

2, ,,,,

	lace of Business						
728 Major UITE 314		Mailing Address					
UIIC 314	BOULEVARD	5728 MAJOR BOULEVAR	20				
RLANDO FL 32819		SUITE 314					
		ORLANDO FL.32819					
						DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified	
- Principal	Place of Business					07/25/1991	
Za. Walling A			ess			4. FEI Number	
Suite, Apt. #, etc.		26			_	59-3076627 Applied For	
		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State				5. Certificate of Status Desired \$8.75 Additional Fee Required	
		28				C Et al C	
Zip	Country	Zip	<del></del> _			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees	
	25	20	<u> </u>	untry		8. This corporation owes the current year	
	9. Name and Address of Curren	Registered Agent	30	<del></del>		Intangible Personal Property	
1M2				81	Name	10. Name and Address of New Registered Agent	
300	VELY, STEPHEN W				ivame		
200 S ORANGE AVE SUITE 3000 ORLANDO FL 32801				82	Street Addr	ess (P.O. Box Number is Not Acceptable)	
UHL	ANDU FL 32801			83			
_				84	City	·	
Pursuan	it to the provisions of sections 607 0502	and 607 1500 Et	<u> </u>	<u> </u>		ation submits this statement for the purpose of changing its registered	
-office or	registered agent, or both, in the State of	of Florida, Such change was	es; the ab	ove-na	med corpor	ation submits this statement for the purpose of changing its	
NATURE	and accept the obligation	ions of, section 607,0505, Flo	prida Stat	utes.	ie corporatio	ation submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered	
- NATURE	Signature, typed or printed name of registered agent a					,	
	OFFICERS AND	DIRECTORS (NO	TE: Register	red Agent	t signature requi	red when reinstating) DATE	
-	יים די	DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
j	DEXTER, JIM	[_] DETELE	1.1 TIT	LE			
FADORESS	5728 MAJOR BLVD., STE 314	_	1.2 NA	ME		Change Addition	
T-ZIP	ORLANDO FL			EET ADD		•	
	MVP		1.00	<u> </u>	_:		
}	KENDRICK, MICHAEL	DELETE	2.1 TITL	Ε.			
TADDRESS	UNIT 19, STAFFORD PARK	<b>-</b>	2.2 NAM	Œ.	1 -		
T-ZIP	TELFRD,SHROP,ENGLAND		2.3 STREET ADDRESS		RESS		
	ST ST		2.4 CITY	-ST-ZIP	- {		
	STRIPLIN, S TEPHEN	L_ DELETE	3.1 TITLE	E			
ADDRESS	5728 MAJOR BLVD STE 314		3 2 NAM	E	.	☐ Change ☐ Addition	
-ZIP	ORLANOD FL		3.3 STRE	ET ADDR	RESS		
<del></del>	ONDARIOD FE		3.4 CITY-		}		
		DELETE	4.1 TITLE				
ADDDECO			4.2 NAME	·		Change Addition	
ADDRESS	-		4.3 STREE	ET ADDRA	F66	}	
ZIP			4.4 CITY-S			į	
ļ		DELETE	5.1 TITLE				
}	:		5.2 NAME		1	Change Addition	
ADDRESS			5.3 STREE		:ee	, , , , , , , , , , , , , , , , , , , ,	
ZIP			a	2	.00	j	
" 1		DELETE	5.4 CITY-S 6.1 TITLS	1-219	<del></del> -		
1.		٠. ١٥٢٣/١٤	1.		1	Change Addition	
)			6 2 NAME		1	Addition	
ODRESS	•	Į.	63 STREET	ADDRES	99.		
P	<u></u>		1 .	2	1	1	
reby cortif	y that the information supplied with this t	Wing does not qualify for the	64 CITY-ST	710		119.07(3)(i), Florida Statutes. I further certify that the information I have the same legal effect as if made under oath; that I am by Chapter 607, Florida Statutes, and that many that I am	