

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P37437**

1. Entity Name

FRITZ TRAVEL, INC.

Principal Place of Business

Mailing Address

1342 Colonial Blvd., Ste. K-82
Ft. Myers, FL 33907

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
593104293

Applied For.
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

David M. Fritz
1342 Colonial Blvd., Ste. 37, Bldg. E
Ft. Myers, FL 33907

Name
David M. Fritz
Street Address (P.O. Box Number Not Acceptable)
1342 Colonial Blvd., Ste. K-82
City
Ft. Myers **FL** **33907**

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: Registered Agent signature required when reinstating)

DATE

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
- Secretary/Director ☒ Delete
- Estate of Bettye L. Fritz
123 NW 4th St., #203
Evansville, IN 47708

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President/Secretary ☒ Change ☐ Addition
David M. Fritz
8548 Britannia Dr.
Ft. Myers, FL 33912

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President ☐ Change ☐ Addition
Arthur Fritz
9615 Old State Rd.
Evansville, IN 47711

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Treasurer ☐ Change ☒ Addition
Richard Mangold
1342 Colonial Blvd., Ste. K-82
Ft. Myers, FL 33907

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
100003458491 ☐ Change ☐ Addition
-11/09/00--01045--005
*****35.00 *****35.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
100003458491 ☐ Change ☐ Addition
-01/25/01--01004--083
*****115.00 *****115.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-11-01 944-275-1717

CR2E034 (9/99)