2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2005
Secretary of State

DOCUMENT# P93000087648

Entity Name: TRAVEL CENTRE OF GAINESVILLE, INC.

Current Principal Place of Business:

3601 SW 2ND AVE
SUITE G
GAINESVILLE, FL 32607 US

New Principal Place of Business:

Current Mailing Address:

3601 SW 2ND AVE
SUITE G
GAINESVILLE, FL 32607 US

New Mailing Address:

FEI Number: 59-3214064 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBAR, ROBERT C
3601 SW 2ND AVE
SUITE G
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ROBAR, ROBERT C
Address: 3568 SW ARCHER ROAD
City-St-Zip: GAINESVILLE, FL 32608

Title: V ( ) Delete
Name: ROBAR, PATRICIA L
Address: 3568 SW ARCHER ROAD
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ROBAR, ROBERT C
Address: 844 SW 51 WAY
City-St-Zip: GAINESVILLE, FL 32607

Title: V (X) Change ( ) Addition
Name: ROBAR, PATRICIA L
Address: 833 SW 51 WAY
City-St-Zip: GAINESVILLE, FL 32607

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT C ROBAR O 07/07/2005

Electronic Signature of Signing Officer or Director Date