## **PROFIT** CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # POADODOGZOR

|  | BUSINESS OF TRAVEL, INC   |  |  | <u></u>   |  |                                       |                    |                  |
|--|---|--|--|---|--|---------------------------------------|--------------------|------------------|
| Principal Place of Business Mailing Address  |   |  |  |   |  |                                       |                    |                  |
| 3400 TAMIAMI TRAIL PORT CHARLOTTE FL 33952 PORT CHARLOTTE FL 33952 PORT CHARLOTTE FL 33952                                       |   |  | U\$4 4   | 0.4   | 1  |                                       |                    |                  |
|  |   |  | 野 cf   |   | DO NOT WRITE IN THIS SPACE               |                                       |                    |                  |
| ļ  |   | LITCHFIE   | 177  |   | 3. Date Incorporated or Qualifec         | 1                                     |                    |                  |
| 1  |   | LITCHFIA   | LO C   | 7 06759   | 12/28/1994                               |                                       |                    |                  |
| 2. Principal Place of Business 2a. Mailing Adgress   |   |  |  |   | 4. FEI Number                            |                                       | Αp                 | plied For        |
| 21   |   | 26 C/D K.L. SZ   | RADA   | CPA   | 65-0555057                               |                                       |                    | Applicable       |
| Suite, Apt.  | . #, etc.   | Suite, Apt. #, etc.  |  |   | 5. Certificate of Status Desired         |                                       | \$8.75 /<br>Fee Re | Additional       |
| 22   |   | 121 1 2 2 2 2 2  | 2/7  |   |  |                                       |                    | <del></del>      |
| - City & Stat  | te == -   | 28 217ChF16C0 CT   |  | Election Campaign Financing     Trust Fund Contribution     Added to Fees |  |                                       |                    |                  |
| 23 Zh  | Country   | 28 <u>L17Ch</u> F/4  | Coun   |   | 8. This corporation owes the cur         | rent year Interv                      |                    | J . 563          |
| Ζlp  | Country   |  | 30 Coun  | ·· 7  | Personal Property Tax.                   |                                       | ] Yes              | □No              |
| 24   | 9. Name and Address of Curren   |  | 301  |   | 10. Name and Address of New              |                                       |                    |                  |
| <del> </del>   | 2. Italia min unaises ai annell   |  | 1  | 1 Name  |  |                                       |                    |                  |
| ROSS, WARREN R   |   |  |  | Charact Andre   | ress (P.O. Box Number is Not Accept      | (abla)                                |                    |                  |
| 201  | 201 WEST MARION AVE.  |  |  | B2 Street Add   | iress (F.O. Box Number is Not Accep      | CBDI87                                |                    |                  |
| SUITE 301  |   |  |  | 33  |  |                                       |                    |                  |
| PUN  | NTA GORDA FL 33950  |  | ļ.   | <u> </u>  |  |                                       | 85 Zip (           | `orto            |
| •  |   |  |  | 34 City   |  | ₽₺                                    | - }                |                  |
| 11. Pursuant   | to the provisions of Sections 607.050   | 2 and 607.1508, Florida Stat                                 | utes, the abo  | ove-named con   | poration submits this statement for the  | purpose of cha                        | nging its          | registered .     |
| office or o  | t to the provisions of Sections 607.050;<br>registered agent, or both, in the State of<br>arm familiar with, and accept the obligat | of Florida. Such change was<br>tions of, Section 607.0505, F | authorized t<br>lorida Statut  | by the corporations.  | ion's poard of directors. I fleteby acce | pt the appointing                     | icin as io         | Jistered .       |
| SIGNATURE  | Signature, typed or printed hame of regulared agen  | t and title if applicable (NO                                | TE: Registered A   | gent signature requir   | ed when reinstating)                     | DATE                                  |                    |                  |
| 12.  | OFFICERS AN   |  | 13.  |   | ADDITIONS/CHANGES TO DI                  | FICERS AND I                          | DIRECTO            |                  |
| TITLE  | DP  | DELETE   |  | E   |  |                                       | Change             | ☐ Addition       |
| NAME   | IRWIN, JAMES B  |  | 1.2 NAM  | <b>E</b>  |  |                                       |                    | 1                |
| STREET ADDRESS   | 1   |  | 1.3 STR  | EET ADORESS   |  |                                       |                    |                  |
| CITY-ST-ZIP  | PUNTA GORDA FL.   |  | 1.4 C/TY   | -ST-ZIP   |  |                                       |                    |                  |
| TITLE  | ST  | ☐ DELETE   | 2.1 1111.  | E   |  | E                                     | ] Change           | Addition         |
| NAME   | SEAL, STEPHEN   |  | 2.2 NAM  | E   | STEPHEN SEAH.                            |                                       |                    | ł                |
| STREET ADDRESS   |   |  | 2.3 STR  | EET ADORESS   |  |                                       |                    | - <del>-</del> · |
| CITY-ST-ZIP  | LITCHFIELD CT   |  |  | •   |  |                                       |                    | · · ·            |
|  |   |  |  | Y-ST-ZIP  |  | ·                                     | T.Cha              | - Address        |
| TITLE  | VP  | ☐ DELETE   | 3.1 TITL   | E   |  |                                       | ] Change           | Addition         |
| NAME   | VP<br>HENDRIK, COLN   | ☐ DELETE   | 3.1 TITLE<br>3.2 NAM   | E<br>E  |  | · · · · · · · · · · · · · · · · · · · | ] Change           | Addition         |
| i  | VP<br>HENDRIK, COLN<br>3-4450 N·SHORE-DR  | ☐ DELETE   | 3.1 TITU<br>3.2 NAM<br>3.3 STR   | E<br>EET ADORESS  |  |                                       | Change             | Addition         |
| NAME STREET ADDRESS CITY-ST-ZIP  | VP<br>HENDRIK, COLN   |  | 3.1 TITU<br>3.2 NAM<br>3.3 STRI<br>3.4. CFN  | E<br>EET ADDRESS<br>Y-ST-ZIP  |  |                                       | <del></del>        |                  |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE  | VP<br>HENDRIK, COLN<br>3-4450 N·SHORE-DR  | ☐ DELETE   | 3.1 TITU<br>3.2 NAM<br>3.3 STR<br>3.4 CITU<br>4.1 TITU   | E<br>EET ADORESS<br>V-ST-ZIP<br>E   |  |                                       | Change             | Addition         |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | VP<br>HENDRIK, COLN<br>4450 N SHORE DR-<br>PUNTA GORDA FL 33980   |  | 3.1 TITLI<br>3.2 NAM<br>3.3 STRI<br>3.4. CFIN<br>4.1 TITLI<br>4. 2 NAM   | E EET ADDRESS   |  |                                       | <del></del>        |                  |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS  | VP<br>HENDRIK, COLN<br>4450 N SHORE DR-<br>PUNTA GORDA FL 33980   |  | 3.1 TITU<br>3.2 NAM<br>3.3 STR<br>3.4 CITO<br>4.1 TITU<br>4.2 NAM<br>4.3 STR   | E EET ADORESS V-ST-ZIP E EET ADORESS                                      |  |                                       | <del></del>        |                  |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  | VP<br>HENDRIK, COLN<br>4450 N SHORE DR-<br>PUNTA GORDA FL 33980   | ☐ DELETE   | 3.1 TITU<br>3.2 NAM<br>3.3 STR<br>3.4 CFD<br>4.1 TITU<br>4.2 NAM<br>4.3 STR<br>4.4 CITY  | E EET ADDRESS V-ST-ZIP E EET ADDRESS V-ST-ZIP F-ST-ZIP                    |  | С                                     | Change             | Addition         |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE  | VP<br>HENDRIK, COLN<br>4450 N SHORE DR-<br>PUNTA GORDA FL 33980   |  | 3.1 TITU<br>3.2 NAM<br>3.3 STR<br>3.4 CFN<br>4.1 TITU<br>4.2 NAM<br>4.3 STR<br>4.4 CTY<br>5.1 TITU   | E EET ADDRESS Y-ST-ZIP E EET ADDRESS '-ST-ZIP E                           |  | С                                     | <del></del>        |                  |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | VP<br>HENDRIK, COLN<br>4450 N. SHORE DR<br>PUNTA GORDA FL 33980   | ☐ DELETE   | 3.1 TITU<br>3.2 NAM<br>3.3 STR<br>3.4 CITV<br>4.1 TITU<br>4.2 NAM<br>4.3 STR<br>4.4 CITY<br>5.1 TITU<br>5.2 NAM  | E EET ADDRESS  /- ST-ZP E EET ADDRESS  ST-ZP E E                          |  | С                                     | Change             | Addition         |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS                                  | VP<br>HENDRIK, COLN<br>4450 N. SHORE DR<br>PUNTA GORDA FL 33980   | ☐ DELETE   | 3.1 TITU<br>3.2 NAM<br>3.3 STR<br>3.4 CITI<br>4.1 TITU<br>4.2 NAM<br>4.3 STR<br>4.4 CITY<br>5.1 TITU<br>5.2 NAM<br>5.3 STRI  | E EET ADDRESS  /- ST-ZP E EET ADDRESS  ST-ZP E E EET ADDRESS              |  | С                                     | Change             | Addition         |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP                      | VP<br>HENDRIK, COLN<br>4450 N. SHORE DR<br>PUNTA GORDA FL 33980   | ☐ DELETE   | 3.1 TITU<br>3.2 NAM<br>3.3 STR<br>3.4 CITI<br>4.1 TITU<br>4.2 NAM<br>4.3 STR<br>4.4 CITY<br>5.1 TITU<br>5.2 NAM<br>5.3 STRI  | E EET ADDRESS   |  |                                       | Change             | Addition         |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE                | VP<br>HENDRIK, COLN<br>4450 N. SHORE DR<br>PUNTA GORDA FL 33980   | ☐ DELETE   | 3.1 TITU<br>3.2 NAM<br>3.3 STR<br>3.4 CITI<br>4.1 TITU<br>4.2 NAM<br>4.3 STR<br>4.4 CITY<br>5.1 TITU<br>5.2 NAM<br>5.3 STRI<br>5.4 CITY<br>6.1 TITU  | E EET ADDRESS  /- ST-ZP E EET ADDRESS  ST-ZP E E EET ADDRESS ST-ZP E E    |  |                                       | Change             | Addition         |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME | VP<br>HENDRIK, COLN<br>3-4450 N. SHORE DR-<br>PUNTA GORDA FL 33980  | ☐ DELETE   | 3.1 TITLU 3.2 NAM 3.3 STR 3.4 CITT 4.1 TITLU 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITLU 5.2 NAM 5.3 STR 5.4 CITY 6.1 TITLU 6.2 NAM   | E EET ADDRESS   |  |                                       | Change             | Addition         |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE                | VP<br>HENDRIK, COLN<br>3-4450 N. SHORE DR-<br>PUNTA GORDA FL 33980  | ☐ DELETE   | 3.1 TITLU 3.2 NAM 3.3 STR 3.4 CITP 4.1 TITLU 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITLU 5.2 NAM 5.3 STR 5.4 CITY 6.1 TITLU 6.2 NAM 6.3 STRI 6.3 ST | E EET ADDRESS  /- ST-ZP E EET ADDRESS  ST-ZP E E EET ADDRESS ST-ZP E E    |  |                                       | Change             | Addition         |

14. 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 ennual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under each; 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STANDER SINGLE STRADA

STANDER AND TYPED OR PRINTED NAME OF EIGHING OFFICER OR DIRECTOR PO A.

STANDER AND ILYPED OR PRINTED NAME OF EIGHING OFFICER OR DIRECTOR PO A.

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7-1-99

**FILED** Jun 18, 1999 8:00 am Secretary of State 06-18-1999 90007 038 \*\*\*550.00

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