

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000022525

FILED  
Mar 22, 2002 8:00 AM  
Secretary of State

Entity Name: PAGE TRAVEL SERVICES, INC.

## Current Principal Place of Business:

10879 METRO PARKWAY  
FT. MYERS, FL 33912

## New Principal Place of Business:

18241 PARKRIDGE CT.  
FT. MYERS, FL 33908

## Current Mailing Address:

10879 METRO PARKWAY  
FT. MYERS, FL 33912

## New Mailing Address:

18241 PARKRIDGE CT.  
FT. MYERS, FL 33908

FEI Number: 65-0558486

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PAGE, FEROL  
3458 HANCOCK BRIDGE PKWY., UNIT 154  
NORTH FORT MYERS, FL 33903 US

## Name and Address of New Registered Agent:

PAGE, FEROL  
18241 PARKRIDGE CT.  
FT. MYERS, FL 33908 US

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:

03/22/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PAGE, FEROL  
Address: 18241 PARKRIDGE CT  
City-St-Zip: FORT MYERS, FL 33908

Title: STD ( ) Delete  
Name: PAGE, CHERYL  
Address: 6075 ISLAND PARK COURT  
City-St-Zip: FORT MYERS, FL 33908

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: FEROL PAGE

P

03/22/2002

Electronic Signature of Signing Officer or Director

Date