

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2001 8:00 am
Secretary of State
 04-16-2001 90050 019 ***150.00

DOCUMENT # P95000065839

1. Entity Name
ITRAVEL PARTNERS, INC.

Principal Place of Business
5711-1 INDEPENDENCE CIRCLE
FT MYERS FL 33912
US

Mailing Address
~~5711-1 INDEPENDENCE CIRCLE~~
~~FT MYERS FL 33912~~
~~US~~

2. Principal Place of Business

3. Mailing Address
P.O. Box 07310

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
FT. MYERS, FL

4. FEI Number **65-0602471**

Applied For
 Not Applicable

Zip

Country

Zip
33919

Country
USA

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

VILLALOBOS, P. MICHAEL
~~5711-1 INDEPENDENCE CIRCLE~~
~~FT. MYERS FL 33912~~

Name
RICHARD JOHNSTON JR
 Street Address (P.O. Box Number is Not Acceptable)
2121 McGREGOR BLVD
 City **FORT MYERS** FL Zip Code **33901**

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)

4/4/01
 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, 2001 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
CEO
GRAY, THOMAS ☐ Delete
5711 INDEPENDENCE CIRCLE
FORT MYERS FL 33912

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DIRECTOR ☒ Change ☐ Addition
Gray, Thomas
5711-1 Independence Circle
Ft. Myers, FL 33912

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
PD ☒ Delete
RUNYON, THOMAS
5711-1 INDEPENDENCE CIRCLE
FT. MYERS FL 33912

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
SD ☒ Delete
VILLALOBOS, P. MICHAEL
5711-1 INDEPENDENCE CIRCLE
FT MYERS FL 33912

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ☐ Delete
SAYLORS, JACK V
5711-1 INDEPENDENCE CIRCLE
FT MYERS FL 33912

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ☒ Delete
MARTS, RICHARD
5711-1 INDEPENDENCE CIRCLE
FT MYERS FL 33912

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ☐ Delete
UPTON, RICHARD
5711-1 INDEPENDENCE CIRCLE
FT MYERS FL 33912

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
CHAIRMAN ☒ Change ☐ Addition
UPTON, RICHARD
5711-1 Independence Circle
Ft Myers FL 33912

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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)