

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000086141

1. Entity Name
SUNSPASH TRAVEL, INC.

FILED
Jul 13, 2000 8:00 am
Secretary of State

07-13-2000 90021 027 ***150.00

Principal Place of Business
125 HILLTOP ST
DAVENPORT FL 33837

Mailing Address
125 HILLTOP ST
DAVENPORT FL 33837

2. Principal Place of Business
3710 CR ST
Suite, Apt. #, etc.

3. Mailing Address
3710 CR ST
Suite, Apt. #, etc.

City & State
DAVENPORT

City & State
DAVENPORT

4. FEI Number 59-3345089

Applied For
Not Applicable

Zip 33837 Country USA

Zip 33837 Country USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOVONI, BRIAN R
141 5TH ST NW, SUITE 100
WINTER HAVEN FL 33881

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 *Eckersley* ECKERSLEY

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE 7/13/00

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D BLACKBURN, JASON P	125 HILLTOP ST	DAVENPORT FL 33837	
	D ECKERSLEY, MICHAEL C	125 HILLTOP ST	DAVENPORT FL 33837	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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] SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 7/13/00

863 424 6193
Daytime Phone #

Attachment
OFF 89500086141
POB 69883

**J and M Management Services Inc.,
3710 CR54.
Davenport.
Florida.33837-6542**



July 5th 2000.

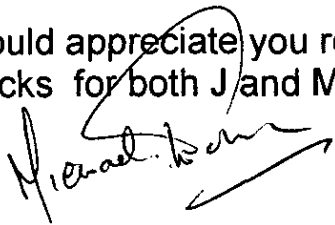
Dear Sirs,

I was very surprised to receive the second notices as I thought that I had paid them and returned them already.

The green originals are not in my office for either company .

We did have some mail disappear about the time that we would have sent them to you which was state Sales Tax but they let me know immediately and we managed to sort it out by reissuing the checks.

I would appreciate you reconsidering the late fee and accept the checks for both J and M Management and Sunsplash Travel.



Michael.C.Eckersley