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May 01 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000017880 (1)

1. Corporation Name

HOFFMASTER TRAVEL, INC.

Principal Place of Business

5777 BENEVA ROAD SOUTH  
SARASOTA FL 34233

Mailing Address

5777 BENEVA ROAD SOUTH  
SARASOTA FL 34233-4105



3. Date Incorporated or Qualified  
02/26/1996

3a. Date of Last Report

2. Principal Place of Business

21 1263 S. BENEVA RD.

Suite, Apt. #, etc.

22

City & State

23 SARASOTA, FL

Zip

24 34232

Country

2a. Mailing Address

26 1263 S. BENEVA RD.

Suite, Apt. #, etc.

27

City & State

28 SARASOTA, FL

Zip

29 34232

Country

4. FEI Number  
65-0646271

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

JOHNSON, DAVID P  
5777 BENEVA ROAD SOUTH  
SARASOTA FL 34233

10. Name and Address of New Registered Agent

81 Name

PREWITT, DAN

82 Street Address (P.O. Box Number is Not Acceptable)

5777 BENEVA RD. S.

83

84 City

SARASOTA

FL

85 Zip Code

34233

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.05, Florida Statutes.

SIGNATURE

*[Signature]*

(NOTE: Registered Agent signature required when reinstating)

4/21/97

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
0  
HOFFMASTER, JEFFREY  
5777 BENEVA ROAD SOUTH  
SARASOTA FL 34233

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ DELETE

TITLE  
NAME  
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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP  
P.T.S.D.  
HOFFMASTER, JEFFREY  
1263 S. BENEVA RD.  
SARASOTA, FL 34232

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP  
☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP  
☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP  
☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP  
☐ Change ☐ Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEFFREY HOFFMASTER

4/21/97

941-953-2289

Date

Daytime Phone #

0426036

CR2E034 (9/96)