

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 08, 2000 8:00 am
Secretary of State

06-08-2000 90011 022 ***158.75

DOCUMENT # **796000047982** ✓
 1. Entity Name
Tours And Detours

Principal Place of Business Mailing Address
12811 66TH STN
LARGO, FL 33773

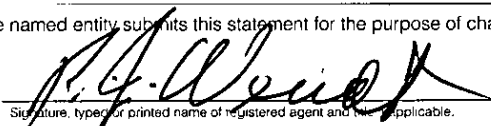
2. Principal Place of Business 3. Mailing Address
12811 66TH ST N **12811 66TH ST N**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
LARGO **LARGO**
 Zip Country Zip Country
FL **33773** **FL** **33773**

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3387814** Applied For
 Not Applicable
 5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
ROBERT WENDT
1272 ABBEY CRESCENT LANE
CLEARWATER
FL 33759

7. Name and Address of New Registered Agent
 Name **ROBERT WENDT**
 Street Address (P.O. Box Number is Not Acceptable)
1272 ABBEY CRESCENT LANE
 City **CLEARWATER** **FL** Zip Code **33759**

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  DATE **4/29/00**
Signature, typed or printed name of registered agent and not applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☐ **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 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

TITLE	President	<input type="checkbox"/> Delete
NAME	Robert J. Wendt	
STREET ADDRESS	1272 Abbey Crescent Lane	
CITY-ST-ZIP	Clearwater FL 33759	
TITLE	Sec	<input type="checkbox"/> Delete
NAME	Dean Wendt	
STREET ADDRESS	1272 Abbey Crescent Lane	
CITY-ST-ZIP	Clearwater FL 33759	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GREGORY BRAY	
STREET ADDRESS	217 27th STREET N	
CITY-ST-ZIP	ST PETERSBURG FL 33713	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:  **R. J. Wendt** **4/29/00** **727 535-8199**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)