## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham •

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600052153 (9)

FAR AWAY TRAVEL & SERVICES, INC.

pg.1

FILED

. 97 MJB -8 PH 2: 02

LLGN HARRI GE STATE TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address				T LANTEDOR FILM FRANC MESSES MARIN MARIN MARIN MARIN MARIN MESSES FRANCE LINEAL LAND LAND MARIN					/# (()) ( <b>0</b> ))
1118 \$ FLORIDA AVE SUITE C1		1118 S FLORIDA AVE SUITE C1	SUITE C1			DO NOT MIDITE IN THIS SPACE			
LAKELAND FL	33803	LAKELAND FL 33803	LAKELAND FL 33803			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 3a. Date of Last Report			
						3. Date Incorporated or Qualified 06/17/1996	36. Da		
~	lace of Business	2a. Mailing Address				4. FEI Number		Ap	oplied For
21 Sa		26 Same				59-3386324 Not Applicable			
Suite, Apt.		Suite, Apt #, etc.	27			5. Certificate of Status Desired Fee Required			
City & State	e	<del>  · · ·</del> ·	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip	Country				8. This corporation owes or has paid the current year Intangible				
24	25 9. Name and Address of C	29	[30]			Personal Property Tax due June 30. Yes XX No  10. Name and Address of New Registered Agent			
		Ultelit Negistered Agent		<b>81</b> Na	me	. · · · · · · · · · · · · · · · · · · ·	Aleteren y	(Bent	
GRAHAM, JOHN H				N/A					
	B S FLORIDA AVE		82 Street Ad			dress (P.O. Box Number is Not Acceptable)			
	TE C1		83						
LAK	ELAND FL 33803			03					ļ
				84 Cit	,		FL		Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 607.0505, Florida Statutes.									
SIGNATURE SUN 1 / Sofras									
12.		red agent and title if applicable (NO IS AND DIRECTORS	TE: Registered	Agent sign	ature require	ADDITIONS/CHANGES TO OFFIC	PER AND	DIRECTOR	- INI 30
TITLE	DELETE			1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	JENS AND	Change	Addition
NAME	GRAHAM, LETICIA R			1.2 NAME				onunge	
	1302 S HARTSELL AVE				2230004				
STREET ADDRESS	LAKELAND FL 33803			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP					
CITY-ST-ZIP TITLE	DANELPHID I'L 33003	DELETE	2.1 Til					Change	Addition
NAME	GRAHAM, JOHN H		2.1 III					C) Overige	
STREET ADDRESS	1118 S FLORIDA AVE			vil Reet addri	·ec				
	LAKELAND FL 33803				:55				ļ
CITY-ST-ZIP TITLE	LANELAND PL 33003	DELETE	2.4 UI	ry-st-zip				Change	Addition
i		_ butte	3.2 NA						
STREET ADDRESS				VIE Reet addri	ee				ĺ
CITY-ST-ZIP		•		IY-ST-ZIP	.33				
TITLE		DELETE	4.1 TH		+			Change	Addition
NAME		time Officers	4. 2 NA			5000022 -08/1 <u>2/</u>	2652	ŽŎŠ.	G
				iyil Reft addri		-08/12/	9701	10971	002 <sup></sup>
STREET ADDRESS			4		.33	****16	5.00	非非非常1	65.00
CITY-ST-ZIP TITLE	<b></b>	DELETE	5.1 TIT	Y-\$1-ZIP				Change	Addition
NAME			5.2 NA					ondrige	
STREET ADDRESS			1	REET ADDRI	.00				
CITY-ST-ZIP TITLE		DELETE	6.1 TIT	Y-S1-ZIP	<del></del>	· · · · · · · · · · · · · · · · · · ·		Change >	Al . Addition
		C Detect	6.1 III			; :			
NAME CIRCLE ADDRESS			1		.00	·		1KA	<i>IJ /</i>
STREET ADDRESS				EET ADDRI	:55			(\//	'/
CITY-ST-ZIP			64 CIT	Y-ST-ZIP					

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.

Leticia R. Graham (

(941)688-4589

pg.2

FAR AWAY TRAVEL & SERVICES, INC. 1118 SOUTH FLORIDA AVENUE SUITE C-1 LAKELAND, FLORIDA 33803 TELEPHONE No. (941) 688-4589 \*\* FAX (941) 686-9319

July 17, 1997.

Florida Department of State, Division of Corporations Post Office Box 1500 Tallahassee, Florida 32302-1500

RE: Document # P96000052153 (9)

Dear Sir:

We would like to let you know that we never received the first notice of our annual report. This notice we received it today.

We are requesting if it is possible to honor the late fees.

Sincerely,

Leticia R. Graham

Enclosure: \$ 165.00 Check