

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 27, 2002 8:00 am
Secretary of State

08-27-2002 90118 005 ***150.00

DOCUMENT # **P97000002427**

1. Entity Name

YEE HAW TRAVEL CENTER, INC

DO NOT WRITE IN THIS SPACE

976796

2. Principal Place of Business

SP27 CARAVAN CT

3. Mailing Address

9042 PINNACLE CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ORLANDO FL

City & State

WINDERMERE FL

Zip

32819

Country

ORANGE

Zip

32786

Country

ORANGE

4. FEI Number

59-3431063

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

NORMAN HULL, ESQUIRE

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

746 N. MAGNOLIA

SUITE A

City

ORLANDO

FL

Zip Code

32803

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 reconstituting)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
P, T, S	TRACI LEVIN	9042 PINNACLE CIRCLE	WINDERMERE, FL 32786
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

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

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

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

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

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

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

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachment

P970000024279 C

YEEHAW TRAVEL

HOTEL RESERVATIONS & GUEST SERVICES

August 21, 2002

Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

Dear Sir:

Please find attached the UBR for Yeehaw Travel for the year 2002. Our attorney just notified us that through a routine record search he found that we never filed the 2002 form. After checking our records, we discovered we never received the 2002 UBR form to remit to you.

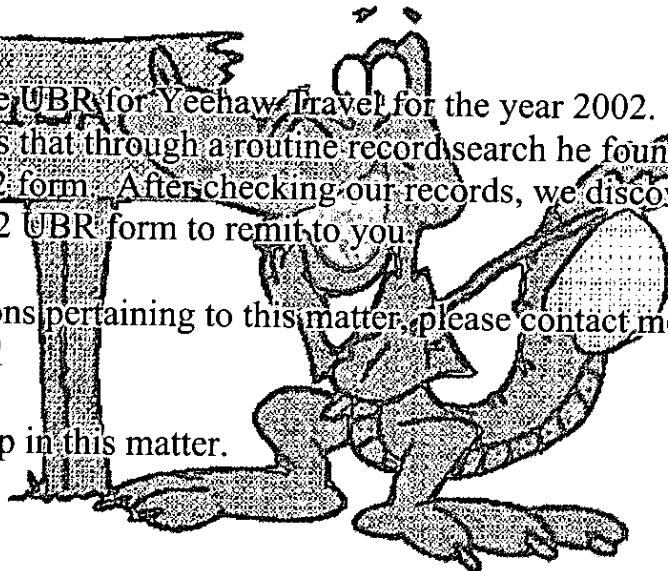
If you have any questions pertaining to this matter, please contact me at this number: 407-363-0031

Thank you for your help in this matter.

Sincerely,

Dale L Magnuson

Dale Magnuson, Controller



9042 PINNACLE CIRCLE, WINDERMERE, FL. 34786

PHONE: (407)363-0031

FAX: (407)363-7780