

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000053023

1. Entity Name

CREATIVE TRAVEL CONCEPTS, INC.

FILED

May 05, 2002 8:00 am
Secretary of State

05-05-2002 90297 035 ***150.00

Principal Place of Business

943 GROVESMERE LOOP
OCOE FL 34761
US

Mailing Address

943 GROVESMERE LOOP
OCOE FL 34761
US

2. Principal Place of Business

943 GROVESMERE LOOP

3. Mailing Address

943 GROVESMERE LOOP

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

OCOE, FL

City & State

OCOE, FL

Zip

34761

Country

US

Zip

34761

Country

US

4. FEI Number

59-3516865

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HERRMANN, JANIS M
608 E CENTRAL BLVD
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name

C. NORMAN PRICHER

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

1560 N. ORANGE AVE

SUITE 600

City

WINTER PARK

FL

Zip Code

32789

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 reinstating)

DATE

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 \$150.00
After May 1, 2002 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 PSD
NAME FLOURNOY, JEFFREY A
STREET ADDRESS 13037 MULBERRY PARK DR #533
CITY-ST-ZIP ORLANDO FL 32821 ☒ Delete

TITLE VTD
NAME ULRICH, D K
STREET ADDRESS 13037 MULBERRY PARK DR #533
CITY-ST-ZIP ORLANDO FL 32821 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSD
NAME FLOURNOY, JEFFREY A
STREET ADDRESS 943 GROVESMERE LOOP
CITY-ST-ZIP OCOEE, FL 34761 ☒ Change ☐ Addition

TITLE VTD
NAME ULRICH, D K
STREET ADDRESS 943 GROVESMERE LOOP
CITY-ST-ZIP OCOEE, FL 34761 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)