2007 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P99000056588

ACCENT ON TRAVEL PINELLAS COUNTY, INC.



Principal Place of Business

3386 S.R. 584-(TAMPA ROAD) PALM HARBOR, FL 34684

Mailing Address

3386 S.R. 584-(TAMPA ROAD) PALM HARBOR, FL 34684

FILED May 02, 2007 08:00 AM Secretary of State

Fee Required



DO NOT WRITE IN THIS SPACE

01242007 No Chg-P 4. FEI Number		CR2E034 (11/05)		
			Applied For	
59-3588	3222		Not Applicable	
5 Cortificate o	of Status Desired	\$8.75 Additional		

6. Name and Address of Current Registered Agent

LABONTE, DIANE L 3386 S.R. 584-(TAMPA ROAD) PALM HARBOR, FL 34684

DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired

	e named entity submits this statement for the p tions of registered agent.	urpose of changing its register	ed office or registered agent, or be	oth, in the State of Florida II am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title t	f applicable. (NOTE: Registere	d Agent signature required when reinstating)	DATE
Fil. After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	ncing \$5.00 May Be Added to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT D LABONTE, DIANE L 12040 92ND AVENUE N SEMINOLE, FL 33772	TORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			er traffic en	Proceedings of the second second
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP			Tom the state of the	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				U00000753562 05/22/07-80025-018 150.00
TITLE NAME STREET ADDRESS	"			

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 receive this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all gainst like empowered.

DIANE L. LABONTE