

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 28, 2000 08:00 AM**
Secretary of State**DOCUMENT # P99000105314****1. Entity Name**

DAYTRIPPERS OF ST. PETERSBURG, INC.

Principal Place of BusinessGLADES BLDG., STE. 303
877 EXECUTIVE CENTER DR. W.
ST. PETERSBURG
33702

FL

Mailing AddressGLADES BLDG., STE. 303
877 EXECUTIVE CENTER DR. W.
ST. PETERSBURG
33702

FL

2. Principal Place of Business
GLADES BLDG., STE. 303**3. Mailing Address**
GLADES BLDG., STE. 303Suite, Apt. #, etc.
877 EXECUTIVE CENTER DR. W.Suite, Apt. #, etc.
877 EXECUTIVE CENTER DR. W.City & State
ST. PETERSBURG

FL

City & State
ST. PETERSBURG

FL

Zip
33702Country
USZip
33702Country
US**4. FEI Number**
59-3613932Applied For
Not Applicable**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentMASCARA ERNEST L
GLADES BLDG., STE. 303
877 EXECUTIVE CENTER DR. W.
ST. PETERSBURG
33702

FL

7. Name and Address of New Registered AgentName
MASCARA ERNEST L
Street Address (P.O. Box Number is Not Acceptable)
GLADES BLDG., STE. 303
877 EXECUTIVE CENTER DR. W.
City
ST. PETERSBURG

FL

Zip Code
33702**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)

03/28/2000

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, 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
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete
DV
MASCARA ERNEST L
GLADES BLDG. STE 303 877 EXECUTIVE CNT DRW
ST. PETERSBURG FL 33702TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
VPS
REFFETT LORI
919 TYRONE BOULEVARD NORTH
ST. PETERSBURG FL 33710TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
PT
REFFETT JEFFERY
919 TYRONE BOULEVARD NORTH
ST. PETERSBURG FL 33710TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
D
KENNEDY JANET
919 TYRONE BOULEVARD NORTH
ST. PETERSBURG FL 33710TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
D
KENNEDY P. J
919 TYRONE BOULEVARD NORTH
ST. PETERSBURG FL 33710TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
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** Jeffery Reffett

PRES 03/28/2000