FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S03965

(8)

DAVIS WORLD TRAVEL, INC.

Pi	rincipal Place of Business	Mailing Address			41: 01011 01011 01011 01011 01011 0101: 1001	
	IS6 HUNTINGTON CIR ICEVILLE FL 32578 S	4456 HUNTINGTON CIR NICEVILLE FL 32578-2386 US				
				3. Date Irrcorporated or Qualified 09/28/1990	3a. Date of Last Report 05/01/1996	
2.	Principal Place of Business	2a, Mailing Address		4. FEI Number	Applied Fo	
21		26		59-3045862	Not Applie	
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
23	City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
24	Zip Country	Zip 29	Country 30	8. This corporation has liability for in: Florida Statutes	tangible tax under s. 199.03. Yes No	
-7		f Current Registered Agent	1001	10. Name and Address of New Regi		

THOMSON, JEAN M. 4456 HUNTINGTON CIR NICEVILLE FL 32578

81	Name JEAN M. Thomson		
82	Street Address (P.Q. Box Number is Not Acceptable)		
83	4456 Huntmaton CR.		
84	City A/ a 1/1/	85	Zip Code

FILED

May 02 1997 8:00am

Secretary of State

office or agent. I a	registered agent, or both, in the State of Florid am familiar with, and accept the obligations of,	a. Such change was a Section 607.0505, Fk	authorized by the corpora orida Statutes.	tion's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent and link in	710617	E Registored Agent signature requ	ried when revisitating) 4/17/97
12.	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	40P	DELFTE	1.1 TITLE	Change Additio
NAME	THOMSON, JEAN M.		1.2 NAME	
STREET ADDRESS	4456 HUNTINGTON CIRCLE		1.3 STREET ADDRESS	
CITY-ST-ZIP	NICEVILLE FL		1.4 CITY - \$1 - ZIP	
TITLE	DVPT	DELETE	2.1 1/1LE	Change Additio
NAME	THOMSON, ROBERT W		2.2 NAME	
STREET ADDRESS	4456 HUNTINGTON CIRCLE		2.3 STREET ADDRESS	
CITY-ST-ZIP	NICEVILLE FL		2. 4 City - ST- ZIP	
TITLE	DS .	DELETE	3 1 7(1) (F	Change Additio
NAME	DAVIS, JOHN T		3.2 NAME	
STREET ADDRESS	3 CEDAR RIDGE		3.3 STREET ADDRESS	
CITY-ST-ZIP	NICEVILLE FL		34 CHY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addilio
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREFT ADDRESS	
CITY-ST-ZIP			4.4 CHY-S1-ZIP	
TITLE		☐ DELE1E	5.1 TITLE	Change Addilio
NAME			5.2 NAME	
STREET ADDRESS			53 STRUET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	61 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
			■	

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 aprual 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.