

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S08863** (0)

1. Corporation Name

SANDLAKE TRAVEL, INC.

Principal Place of Business

**7515 REPUBLIC DR.
ORLANDO FL 32819-8369**

Mailing Address

**7515 REPUBLIC DR.
ORLANDO FL 32819-8369**



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**COACHMAN, FRANCIS SMITH
2550 DINNEEN AVENUE
ORLANDO FL 32804**

3. Date Incorporated or Qualified

10/25/1990

3a. Date of Last Report

03/17/1995

4. FEI Number

59-3034915

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution



**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes



No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0305, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the corporation

(Block 13 Registered Agent signature required when no change)

DATE

OFFICERS AND DIRECTORS

12.

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

**MAYNARD, CHERYL
8420 BLUEPINE COURT
ORLANDO FL**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

**COACHMAN, JUDY
3845 SALMON DRIVE
ORLANDO FL**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VP

**COACHMAN FRANCIS
7516 REPUBLIC DR
ORLANDO FL**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VP

**MAYNARD, ARTHUR
8420 BLUEPINE CT
ORLANDO FL**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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STREET ADDRESS

CITY - ST - ZIP

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13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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SIGNATURE:

Judith N. Coachman - Secretary Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96

107-352-2808

CR2E034 (12/95)