

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

CORPORATION
ANNUAL REPORT

1995



STATE OF FLORIDA

DEPARTMENT OF REVENUE

OFFICE OF CORPORATIONS

SECRETARY OF STATE

APPROVED
AND
FILED

95 MAY -1 AM 10:13

DOCUMENT # **S74194**

(9)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRAVEL MATTERS, INC.

7829 GREENBRIAR PKWY
ORLANDO FL 32819

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ORLANDO FL 32819

PLEASE PRINT OR TYPE IN THIS SPACE

3. Date of Report (Month/Day/Year)	3a. Date of Last Report
08/15/1991	04/12/1994
4. FEI Number	Applied For Not Applicable
59-3084025	
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	

2. Principal Office (City, State, Zip)	2a. Mailing Address
21. City, State, Zip	26. City, State, Zip
22. City, State, Zip	27. City, State, Zip
23. City, State, Zip	28. City, State, Zip
24. City, State, Zip	29. City, State, Zip
25. City, State, Zip	30. City, State, Zip

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROSSMAN, NANCY A.
7829 GREENBRIAR PKWY
ORLANDO FL 32819

B1. Name	
B2. Street Address (P.O. Box Number is Not Acceptable)	
B3. City	
B4. State	B5. Zip Code
FL	

11. Pursuant to the provisions of Sections 607.01(2), (3), and 607.02(1), 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 registered agents, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name and Title)

Signature of New Registered Agent (Print Name and Title)

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS	
NAME	PD ROSSMAN, MARLENE 2021 LEE RD. WINTER PARK FL	1. NAME	☐ Change ☐ Addition
NAME	ROSSMAN, NORMAN 7829 GREENBRIAR PKWY ORLANDO FL	2. NAME	☒ Change ☐ Addition
NAME	RASH, JOE 2021 LEE RD. WINTER PARK FL	3. NAME	☒ Change ☐ Addition
NAME	VSD RASH, RITA D. 2021 LEE RD. WINTER PARK FL	4. NAME	☐ Change ☐ Addition
NAME		5. NAME	☐ Change ☐ Addition
NAME		6. NAME	☐ Change ☐ Addition
NAME		7. NAME	☐ Change ☐ Addition
NAME		8. NAME	☐ Change ☐ Addition
NAME		9. NAME	☐ Change ☐ Addition
NAME		10. NAME	☐ Change ☐ Addition
NAME		11. NAME	☐ Change ☐ Addition
NAME		12. NAME	☐ Change ☐ Addition
NAME		13. NAME	☐ Change ☐ Addition
NAME		14. NAME	☐ Change ☐ Addition
NAME		15. NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information submitted with this filing is voluntarily furnished, is true and correct, and that I am qualified to be the registered agent for this corporation. I further certify that the information submitted with this filing is true and correct, and that I am qualified to be the registered agent for this corporation. I am familiar with and accept the obligations of registered agents, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NANCY A. ROSSMAN DIRECTOR

1/13/95 (407) 354025