

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 10: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S88917 (7)

1. Corporation Name

VACATION & CRUISE RESOURCES, INC.

Principal Place of Business

2717 W. CYPRESS CREEK RD
FT. LAUDERDALE FL 33309

Mailing Address

2717 W. CYPRESS CREEK RD
FT. LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
10/22/1991

3a. Date of Last Report
04/12/1994

4. FEI Number
65-0290945

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. 100.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 4043 Kimberly Blvd J

26 Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Ft. Lauderdale FL

28

Zip

Country

Zip

Country

24 33068

25

USA

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NORMAN, LARRY B
2717 W CYPRESS CREEK RD
FT. LAUDERDALE FL 33309

81 Name

Same

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 607.0505, Florida Statutes.

SIGNATURE: *Larry B Norman*

Typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE: 4/28/95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: P
NAME: NORMAN, LARRY B
STREET ADDRESS: 2717 W CYPRESS CREEK RD
CITY - ST - ZIP: FT LAUDERDALE FL

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE: VP
NAME: MORRIS, BILL
STREET ADDRESS: 2717 W CYPRESS CREEK RD
CITY - ST - ZIP: FT LAUDERDALE FL

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE:
NAME:
STREET ADDRESS:
CITY - ST - ZIP:

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE:
NAME:
STREET ADDRESS:
CITY - ST - ZIP:

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE:
NAME:
STREET ADDRESS:
CITY - ST - ZIP:

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE:
NAME:
STREET ADDRESS:
CITY - ST - ZIP:

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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.

SIGNATURE: *Larry B Norman*
TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: 4/28/95

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