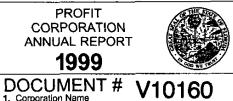
## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999

ELITE TRAVEL OF MARTIN COUNTY, INC.



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jul 21, 1999 8:00 am Secretary of State

07-21-1999 90011 048 \*\*\*550.00

\	\						

Principal Place of Business Mailing Address					( 1880: Steat telt Salet Itala Biftt aufs aibtt diftt Asbri Asbri Asbri Asbri		
3091 SW MARTIN DOWNS BLVD. PALM CITY FL 34990 US 9091 SW MARTIN DOWNS BLVD. PALM CITY FL 34990 US				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified
							01/29/1992
2. Principal Pl	ace of Business	2a. Maili	ng Address				4. FEI Number Applied For
21		26					65-0308678 Not Applicable
Suite, Apt.:	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State			City & State			6. Election Campaign Financing \$5.00 May Be	
23	7	28	City & State			Trust Fund Contribution Added to Fees	
Žip	Country	Zip	·	Cou	intry		8. This corporation owes the current year
24	25	29		30			Intangible Personal Property. Yes No
	9. Name and Address of Curre	nt Registered	Agent				10. Name and Address of New Registered Agent
ħEE	IRICKSON, PATRICIA J.				81	Name	
	4 S.W. SAINT ANDREWS DR.			82 Street Add		Street Add	dress (P.O. Box Number is Not Acceptable)
	M CITY FL 34990				83		
• • • •					63		
					84	City	FL 85 Zip Code
11 Dummant	to the provisions of sections 607 050	2 and 607 150	8 Florida Statute	es the at	NOVE-1	named com	poration submits this statement for the purpose of changing its registered
office or i	registered agent, or both, in the State	of Florida, Su	ich change was a	authorize	d by	the corpora	ation's board of directors. I hereby accept the appointment as registered
_	rm familiar with, and accept the oblig	ations of, sect	10N 607.0303, FII	orida Sta	iules.	•	•
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applica	ble. (N	OTE: Regist	ered Ag	gent signature re	equired when reinstating) OATE
12.	· OFFICERS AI	ID DIRECTOR	≀s	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSD		DELETE	1.1 TI	TLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	DERRICKSON, PATRICIA J	_		1.2 N	AME		[3]
STREET ADDRESS	1864 SW SAINT ANDREWS D	H.		1.3 \$	(REET	ADDRESS	
CITY-ST-ZIP	PALM CITY FL 34990			1.4 CITY-ST-ZIP 2.1 TITLE		-ZIP	
TITLE	VTD Derrickson, William B		DELETE	2.1 (51L) 2.2 NAM		ļ	Change Addition
NAME	1864 SW SAINT ANDREWS D	nD.				ADDRESS	
STREET ADDRESS	PALM CITY FL 34990				ITY-ST-		
CITY-ST-ZIP	D		DELETE	_	3.1 TITLE		Change Addition
NAME	DERRICKSON, STEPHEN		3.2 N		AME		
STREET ADDRESS	4004 OM CANET ANDDENIG OD		3.3 S	TREET	ADDRESS		
CITY-ST-ZIP	PALM CITY FL 34990		3.4 CI		ITY-ST-	-ZIP	
TITLE	D		DELETE	4.1 TITLE			Change Addition
NAME	DERRICKSON, MICHAEL			4.2 N	AME		
STREET ADDRESS	1864 SW SAINT ANDREWS (	IR.		4.3 S	TREET	ADDRESS	
CITY-ST-ZIP	PALM CITY FL 34990			_	TY-ST-	-ZIP	
TITLE			DELETE	5.1 T			Change Addition
NAME				5.2 N			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP			T PELETE		ITY-ST-	-ZIP	Change Addition
TITLE NAME			DELETE	6.1 TITLE 6.2 NAME			L_  Change   Addition
STREET ADDRESS				1		ADDRESS	
CITY-ST-ZIP				1	ITY-ST-	Į.	
14 I hereby co	ertify that the information supplied wit	n this filing doe	s not qualify for t	the exem	ntion	stated in se	ection 119.07(3)(i), Florida Statutes. I further certify that the information
indicated of	on this annual report or supplementa	annual report	is true and accu	ırate and	that	my signatui	re shall have the same legal effect as if made under oath; that I am required by Chapter 607, Florida Statutes; and that my name appears
in Block 12	or Block 13 if shanged, or on an att	achment with	an address.				
SIGNAT	HDE HTHINSICH	104115	MARIE C	1 " 5   3		Ĵ	7/15/99
CIGIAN	CICL SUPPLIES OF THE PARTY OF T	D RENTED WAVE	OF DIGINAL OFFICE	D VB DIBEC	70B		Dotte Done #