

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

FILED
Jan 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 336190 (4)

1. Corporation Name
SANDPIPER GULF RESORT INC



Principal Place of Business 5550 ESTERO BLVD FT MYERS BEACH FL 33931	Mailing Address 5550 ESTERO BLVD FT MYERS BEACH FL 33931
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/08/1968	
21	26	4. FEI Number 59-1225367		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
23	28	Zip		Country	
24	25	29	30		

9. Name and Address of Current Registered Agent

**THOMSON, R.H., II
 5550 ESTERO BLVD
 FT MYERS FL 33931**

10. Name and Address of New Registered Agent

81 Name **STEVEN J. MILLS-PRICE**

82 Street Address (P.O. Box Number is Not Acceptable)
17860 BERMUDA DUNES DR.

83

84 City **FT. MYERS** **FL** 85 Zip Code **33912**

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 Steven J. Mills-Price **STEVEN J. MILLS-PRICE** **1/8/98**
Signature typed or printed (name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	THOMSON, R HURDIS, II	
STREET ADDRESS	5550 ESTERO BLVD	
CITY-ST-ZIP	FT MYERS BEACH, FL 00000	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	ZACK, CRISTEEN S.	
STREET ADDRESS	5550 ESTERO BLVD	
CITY-ST-ZIP	FT MYERS BEACH, FL 00000	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	ANLAUF, HAZEL E	
STREET ADDRESS	5430 WILLIAMS DR	
CITY-ST-ZIP	FT MYERS BEACH, FL 00000	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	STEVEN J. MILLS-PRICE
4.3 STREET ADDRESS	17860 BERMUDA DUNES DR.
4.4 CITY-ST-ZIP	FT. MYERS, FL. 33912
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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 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: Hazel E. Anlauf **HAZEL E ANLAUF** **1/8/98**

CR2E034 (10/97)