

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

FILED
Jan 30 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 # 517936 (1)
 1. Corporation Name
ISLAND HOUSE BEACH CLUB, INC.



Principal Place of Business 2560 ESTERO BLVD. FT. MYERS BCH FL 33931	Mailing Address 2560 ESTERO BLVD. FT. MYERS BCH 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 10/22/1976	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1832061	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	30	Country
				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent TOWNSEND, VERNON 2560 ESTERO BLVD FT MYERS BCH FL 33931				10. Name and Address of New Registered Agent	
				81 Name	SCHNEEBERGER, PAUL
				82 Street Address (P.O. Box Number if Not Acceptable)	2560 Estero Blvd.
				83	
				84 City	Ft. Myers Beach, FL
				85 Zip Code	33931

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 **PAUL SCHNEEBERGER** (NOTE: Registered Agent signature required when replacing) **Paul Schueberger 1-6-98**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DV	<input type="checkbox"/> DELETE	1.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KROULADIS, JIM		1.2 NAME				
STREET ADDRESS	2560 ESTERO BLVD		1.3 STREET ADDRESS				
CITY-ST-ZIP	FT MYERS BCH, FL 00000		1.4 CITY-ST-ZIP				
TITLE	DV	<input type="checkbox"/> DELETE	2.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MESSINA, JOE		2.2 NAME				
STREET ADDRESS	2560 ESTERO BLVD		2.3 STREET ADDRESS				
CITY-ST-ZIP	FT MYER BCH, FL 00000		2.4 CITY-ST-ZIP				
TITLE	DVST	<input type="checkbox"/> DELETE	3.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOYER, NORMAN		3.2 NAME				
STREET ADDRESS	2560 ESTERO BLVD		3.3 STREET ADDRESS				
CITY-ST-ZIP	FT MYER BCH, FL 00000		3.4 CITY-ST-ZIP				
TITLE	DP	<input type="checkbox"/> DELETE	4.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHNEEBERGER, PAUL		4.2 NAME				
STREET ADDRESS	2560 ESTERO BLVD		4.3 STREET ADDRESS				
CITY-ST-ZIP	FT MYER BCH, FL 00000		4.4 CITY-ST-ZIP				
TITLE	DV	<input checked="" type="checkbox"/> DELETE	5.1 TITLE				<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TOWNSEND, VERNON		5.2 NAME				
STREET ADDRESS	2560 ESTERO BLVD		5.3 STREET ADDRESS				
CITY-ST-ZIP	FT MYER BCH, FL 00000		5.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			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: *[Handwritten Signature]* **Jan 6, 1998 941-463-7291**

CR2E034 (10/97)