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Jun 11 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 705671 (6)
1. Corporation Name
OFFSHORE POWER BOAT RACING ASSOCIATION, INC.



Principal Place of Business Mailing Address
P.O. BOX 69-4733 MIAMI FL 33269-0733

3. Date Incorporated or Qualified 05/30/1963
3a. Date of Last Report 02/12/1996

2. Principal Place of Business 21
2a. Mailing Address 26
22 Suite, Apt. #, etc. 27
23 City & State 28
24 Zip 25 Country 29

4. FEI Number 59-1172394
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. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
VANKIRK, DOTTIE
1147 HOLLYWOOD BLVD
HOLLYWOOD FL 33019

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *Dottie Van Kirk* DOTTIE VANKIRK 3/31/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	SD
NAME	BELINE, RONALD M.	1.2 NAME	SPADONI, ART
STREET ADDRESS	1689 SE 7TH ST	1.3 STREET ADDRESS	PO BOX 600 262 3767 NE 168 ST #2
CITY-ST-ZIP	DEERFIELD BCH FL	1.4 CITY-ST-ZIP	N. Miami Bch, FL 33160
TITLE	PD	2.1 TITLE	D
NAME	KENYON, JOHN	2.2 NAME	DON MAZZONE
STREET ADDRESS	2310 NE 215 ST	2.3 STREET ADDRESS	3501 NW 170 LANE
CITY-ST-ZIP	N MIAMI BCH. FL	2.4 CITY-ST-ZIP	MIAMI FL 33015
TITLE	D	3.1 TITLE	(D)
NAME	WERNER, MIKE	3.2 NAME	DEBBIE FLEISCHMAN
STREET ADDRESS	5100 MAGGIORE ST	3.3 STREET ADDRESS	5707 NW 81 TERR.
CITY-ST-ZIP	CORAL GABLES FL	3.4 CITY-ST-ZIP	TAMARAC, FL 33321
TITLE	D	4.1 TITLE	D
NAME	NICHOLSON, MARLENE	4.2 NAME	JOSEPH PADOVANO
STREET ADDRESS	480 NW 139 ST	4.3 STREET ADDRESS	770 CLAUGHTON ISLAND DR. #616
CITY-ST-ZIP	NORTH MIAMI FL	4.4 CITY-ST-ZIP	MIAMI FL 33131
TITLE	VD	5.1 TITLE	D
NAME	KRINER, ART JR	5.2 NAME	JEFF HASSSELL
STREET ADDRESS	3917 ADAMS ST	5.3 STREET ADDRESS	1567 SW 42ND AVE #2
CITY-ST-ZIP	HOLLYWOOD FL	5.4 CITY-ST-ZIP	CORAL GABLES FL 33134
TITLE	TD	6.1 TITLE	D
NAME	VAN KIRK, DOTTIE	6.2 NAME	D ANTHONY MAZZONE
STREET ADDRESS	1147 HOLLYWOOD BLVD	6.3 STREET ADDRESS	312 WESTWARD DR #1
CITY-ST-ZIP	HOLLYWOOD FL	6.4 CITY-ST-ZIP	MIAMI SPRING FL 33166

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Dottie Van Kirk DOTTIE VANKIRK 3/31/97

CFR2E037 (9/96)