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Apr 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 745064 (6)

1. Corporation Name
COCOA BEACH BOATING CLUB, INC.



Principal Place of Business 645 S. ATLANTIC AVE. COCOA BEACH FL 32931 US	Mailing Address 645 S. ATLANTIC AVE. COCOA BEACH FL 32931-2517 US
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3. Date Incorporated or Qualified 11/27/1978	3a. Date of Last Report 04/24/1996
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

4. FEI Number 59-1889055	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

HUEY, SAM
645 S. ATLANTIC AVE.
COCOA BEACH FL 32931

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 *Sandra B. Mortham* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PRES. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRED LEISER	1.2 NAME	MIKE TERSIGNI
STREET ADDRESS	23 WEST POINT DR	1.3 STREET ADDRESS	202 JUNE DRIVE
CITY-ST-ZIP	COCOA BEACH FL	1.4 CITY-ST-ZIP	COCOA BEACH, FL 32931
TITLE	VP <input checked="" type="checkbox"/> DELETE	2.1 TITLE	VICE PRES <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANK SCHNEIDER	2.2 NAME	BILL CHAPP
STREET ADDRESS	630 SO BERNARD AVE	2.3 STREET ADDRESS	630 SO. BREVARD AVE #131
CITY-ST-ZIP	COCOA BEACH FL	2.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	
NAME	MARTHA CRUSEY	3.2 NAME	
STREET ADDRESS	100 PINELLAS LANE #411	3.3 STREET ADDRESS	
CITY-ST-ZIP	COCOA BEACH FL	3.4 CITY-ST-ZIP	
TITLE	T <input checked="" type="checkbox"/> DELETE	4.1 TITLE	GENIE LAZOWSKA <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIKE TERSIGNI	4.2 NAME	TREMBUE
STREET ADDRESS	202 JUNE DRIVE	4.3 STREET ADDRESS	172 JAMAICA DR,
CITY-ST-ZIP	COCOA BEACH FL	4.4 CITY-ST-ZIP	COCOA BEACH, FL 32931
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	FRED LET DIRECTOR <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BILL CHAPP	5.2 NAME	FRED LEISER
STREET ADDRESS	630 S. BREVARD AVE #131	5.3 STREET ADDRESS	23 WEST POINT DR
CITY-ST-ZIP	COCOA BEACH FL	5.4 CITY-ST-ZIP	COCOA BEACH FL 32931
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	DIRECTOR <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	REASONER, JEANE	6.2 NAME	George H. KRUNBENQ
STREET ADDRESS	205 S BANANA RIVER BLVD., APT. 201	6.3 STREET ADDRESS	2090 N. ATLANTIC AVE
CITY-ST-ZIP	COCOA BEACH FL	6.4 CITY-ST-ZIP	COCOA BEACH, FL 32931

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.

CP2E037 (9/96)