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Apr 16 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 # 769065 (4)

1. Corporation Name
AQUARINA COMMUNITY SERVICES ASSOCIATION, INC.



Principal Place of Business Mailing Address
235 HAMMOCK SHORE DR MELBOURNE BEACH FL 32951
235 HAMMOCK SHORE DR MELBOURNE BEACH FL 32951-3941

3. Date Incorporated or Qualified 06/09/1983
3a. Date of Last Report 01/29/1996

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26
22 City & State 27
23 Zip Country 28
24 Zip Country 29 30

4. FEI Number 59-2378001 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

PEEPLER, JAMES W., III, ESQ.
505 N ORLANDO AVENUE
COCOA BEACH FL 32931

10. Name and Address of New Registered Agent

81 Name ~~RAT HARTWELL~~ JAMES BATES
82 Street Address (P.O. Box Number is Not Acceptable) 235 HAMMOCK SHORE DR.
83 Melbourne BEACH
84 City FL 85 Zip Code 32951

11. Pursuant to the provisions of Sections 617.0501 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 [Signature] JAMES BATES 1/28/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD NAME BATES, JAMES DELETED
STREET ADDRESS 235 HAMMOCK SHORE DR
CITY-ST-ZIP MELBOURNE BEACH FL
TITLE D NAME KAUFFMAN, GEORGIA DELETED
STREET ADDRESS 235 HAMMOCK SHORE DR
CITY-ST-ZIP MELBOURNE BEACH FL
TITLE D NAME JOCKER, GEORGE DELETED
STREET ADDRESS 278 AQUARINA BLVD
CITY-ST-ZIP MELBOURNE BEACH FL
TITLE [] NAME [] DELETED
STREET ADDRESS []
CITY-ST-ZIP []
TITLE [] NAME [] DELETED
STREET ADDRESS []
CITY-ST-ZIP []

1.1 TITLE [] Change [] Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE [] Change [] Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE [] Change [] Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE [] Change [] Addition
4.2 NAME MAKINS, ROBERT
4.3 STREET ADDRESS 240 HAMMOCK SHORE DR. UNIT 104
4.4 CITY-ST-ZIP MELBOURNE BEACH, FL. 32951
5.1 TITLE [] Change [] Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE [] Change [] Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE: [Signature] JAMES BATES 1/6/97 407-723-2522
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0019981

CR2E037 (9/96)