

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

PROFIT CORPORATION ANNUAL REPORT 1997



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

FILED
Mar 13 1997 8:00am
Secretary of State

DOCUMENT # M83718 (0)

OCEAN HARBOUR OF ISLAMORADA, INC.



Principal Place of Business: P.O. BOX 840 TAVERNIER FL 33070
Mailing Address: P.O. BOX 840 TAVERNIER FL 33070-0840

3. Date Incorporated or Qualified: 05/31/1988
3a. Date of Last Report: 02/14/1996

2. Principal Place of Business: 21 Suite, Apt. #, etc. 26 Mailing Address: 26 Suite, Apt. #, etc.

22 City & State: 27 City & State

23 Zip: 24 Country: 25 28 Zip: 29 Country: 30

4. FEI Number: 65-0055339 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

JOHNSON, DERRETH
87851 OLD HWY P-4
ISLAMORADA FL 33036

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 607.062 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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE: Vincent A. Johnson Vincent A. Johnson Pres. 3-6-97
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	S	DELETE
NAME	JOHNSON, DERRETH	
STREET ADDRESS	87851 OLD HIGHWAY P-4	
CITY-ST-ZIP	ISLAMORADA FL	
TITLE	VP	DELETE
NAME	MIRMELLI, STEVEN	
STREET ADDRESS	370 STIRRUP KEY BLVD.	
CITY-ST-ZIP	MARATHON FL	
TITLE	S	DELETE
NAME	HARRIS, KEITH A.	
STREET ADDRESS	88181 OLD HWY UNT H1	
CITY-ST-ZIP	ISLAMORADA FL	
TITLE	T	DELETE
NAME	ZIMMERMAN, BRIAN	
STREET ADDRESS	6023 NORTH 35TH STREET	
CITY-ST-ZIP	MILWAUKEE WI	
TITLE	AT	DELETE
NAME	LONG, RAYMOND V.	
STREET ADDRESS	205 OCEAN DR	
CITY-ST-ZIP	TAVERNIER FL	
TITLE	D	DELETE
NAME	HARRIS, L.E.	
STREET ADDRESS	87851 OLD HWY UT #P-41	
CITY-ST-ZIP	ISLAMORADA FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Vincent A. Johnson Vincent A. Johnson 3-6-97 305-852-7451

CR2E034 (9/96)