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Apr 14 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 # **N09468** (2)
1. Corporation Name
PLAYERS CLUB ON THE BAY, INC.



Principal Place of Business 1096 OLD HIGHWAY 98 STE C102B DESTIN FL 32541 US	Mailing Address PO BOX 6417 DESTIN FL 32541-6417 US
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3. Date Incorporated or Qualified 05/28/1985	3a. Date of Last Report 02/27/1996
4. FEI Number 59-2543489	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	

2. Principal Place of Business 21 10221 Highway 98 West	2a. Mailing Address 26 P.O. Box 6225
Suite, Apt. #, etc. 22 Suite 6	Suite, Apt. #, etc. 27
City & State 23 Destin, FL	City & State 28 Destin, FL
Zip 24 32541	Country 25 USA
Zip 29 32541	Country 30 USA

9. Name and Address of Current Registered Agent
**LEWIS, LEYDA R
1096 OLD HIGHWAY 98
STE C102B
DESTIN FL 32541**

10. Name and Address of New Registered Agent

81 Name Ralph H Gelder
82 Street Address (P.O. Box Number Is Not Accepted) 10221 Highway 98 West
83 Suite 6
84 City Destin Destin FL
85 Zip Code 32541

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 *Ralph H Gelder* DATE **4/6/97**

12. OFFICERS AND DIRECTORS

TITLE <input checked="" type="checkbox"/> DELETE	HALL, CARL
NAME	20 PLAYERS CLUB -SANDESTIN
STREET ADDRESS	DESTIN FL
CITY-ST-ZIP	
TITLE <input checked="" type="checkbox"/> DELETE	DST
NAME	DRYDEN, HORACE E.
STREET ADDRESS	21 PLAYERS CLUB-SANDESTI
CITY-ST-ZIP	DESTIN FL
TITLE <input checked="" type="checkbox"/> DELETE	PD
NAME	MILLS, JAKE
STREET ADDRESS	2206 SHORELINE
CITY-ST-ZIP	TUPELO MS
TITLE <input type="checkbox"/> DELETE	D
NAME	SISTRUNK, JACK J
STREET ADDRESS	4925 GREENVILLE AVENUE, SUITE 815
CITY-ST-ZIP	DALLAS TX
TITLE <input type="checkbox"/> DELETE	D
NAME	SCHUPPERT, KENNETH SR
STREET ADDRESS	300 TROON ROAD
CITY-ST-ZIP	PADUCAH KY 42001
TITLE <input type="checkbox"/> DELETE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	President
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Vice President
2.2 NAME	Judy La Marche
2.3 STREET ADDRESS	3304 Tarton Circle
2.4 CITY-ST-ZIP	Birmingham, AL 35242
3.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Secretary/Treasurer
3.2 NAME	Paul Haglund
3.3 STREET ADDRESS	26 Players Club
3.4 CITY-ST-ZIP	Destin, FL 32541
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> 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)(l), 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.

Ralph H Gelder

CR2E037 (9/96)