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Feb 13 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 # N11272 (4)

1. Corporation Name
GULF BREEZE SERTOMA CLUB, INC.



Principal Place of Business 102 EAST GARDEN STREET PENSACOLA FL 32501 US	Mailing Address 102 EAST GARDEN STREET PENSACOLA FL 32501-5624 US
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3. Date Incorporated or Qualified 09/24/1985	3a. Date of Last Report 03/05/1996
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2. Principal Place of Business	2a. Mailing Address
21 504 North Baylen St. Suite, Apt. #, etc.	26 504 North Baylen St. Suite, Apt. #, etc.
22 City & State Pensacola, FL	27 City & State Pensacola, FL
23 Zip 32501	24 Country U.S.A.
25 Country U.S.A.	28 Zip 32501
29 Country U.S.A.	30 Country U.S.A.

4. FEI Number 59-2587239	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

**KOPACK, DANIEL J
102 EAST GARDEN STREET
PENSACOLA FL 32501**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	TD <input checked="" type="checkbox"/> DELETE
NAME	MATT DANNHEISER
STREET ADDRESS	504 N. BAYLEN STREET
CITY-ST-ZIP	PENSACOLA FL 32001
TITLE	SD <input checked="" type="checkbox"/> DELETE
NAME	MICHAEL TIDWELL
STREET ADDRESS	2717 GULF BREEZE PKWY.
CITY-ST-ZIP	GULF BREEZE FL 32561
TITLE	TD <input checked="" type="checkbox"/> DELETE
NAME	RADCLIFFE, DAVID
STREET ADDRESS	957 VESTAVIA WAY
CITY-ST-ZIP	GULF BREEZE FL
TITLE	PD <input checked="" type="checkbox"/> DELETE
NAME	WILLIAMS, GEORGE
STREET ADDRESS	401 PLANTATION HILL RD
CITY-ST-ZIP	GULF BREEZE FL
TITLE	SD <input checked="" type="checkbox"/> DELETE
NAME	MORGAN, JOHN D
STREET ADDRESS	101 BERRY AVE
CITY-ST-ZIP	GULF BREEZE FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President/Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	John D. Morgan
1.3 STREET ADDRESS	101 Berry Avenue
1.4 CITY-ST-ZIP	Gulf Breeze, FL 32561
2.1 TITLE	Tresurer/Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Matt E. Dannheisser
2.3 STREET ADDRESS	504 North Baylen St.
2.4 CITY-ST-ZIP	Pensacola, FL 32501
3.1 TITLE	Secretary/Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Vince Odenbrett
3.3 STREET ADDRESS	3053 Ranchette #6
3.4 CITY-ST-ZIP	Gulf Breeze, FL 32561
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)(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 REQUIRED: **M. E. Dannheisser** Date: **02/05/97** 904/434-7272

CR2E037 (9/96)