

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

FILED
Feb 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P34155 (2)
 1. Corporation Name
BITTER END YACHT CLUB INTERNATIONAL, INC.

Principal Place of Business 875 NORTH MICHIGAN, SUITE 3707 CHICAGO IL 60611	Mailing Address 875 NORTH MICHIGAN, SUITE 3707 CHICAGO IL 60611-1961
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/31/1991	3a. Date of Last Report 07/12/1996
21. Suite, Apt. #, etc.	22. City & State	23. Zip	24. Country	4. FEI Number 36-3520761	Applied For <input type="checkbox"/> Not Applicable
25. Country	26. Suite, Apt. #, etc.	27. City & State	28. Zip	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
29. Country	30. Zip	31. City & State	32. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				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 CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				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 607.0502 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent's signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P STRAUSS, JONATHAN	1.2 NAME	
STREET ADDRESS	3020 WATERLOO	1.3 STREET ADDRESS	
CITY- ST- ZIP	CHICAGO IL	1.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	S HOKIN DANA	2.2 NAME	
STREET ADDRESS	222 E CHESTNUT 10-C	2.3 STREET ADDRESS	
CITY- ST- ZIP	CHICAGO IL	2.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	T GELFELD, MARK	3.2 NAME	
STREET ADDRESS	2252 STRAWBERRY LANE	3.3 STREET ADDRESS	
CITY- ST- ZIP	GLENVIEW IL	3.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D HOKIN, MYRON	4.2 NAME	
STREET ADDRESS	175 EAST DELAWARE	4.3 STREET ADDRESS	
CITY- ST- ZIP	CHICAGO IL	4.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D DUNLOP, DEREK	5.2 NAME	
STREET ADDRESS	BOX 135, BRITTANIC HALL	5.3 STREET ADDRESS	
CITY- ST- ZIP	ROAD TOWN, TORT.,VI	5.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		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 _____ DATE **1/13/97** (312) 266-1025

CR2E034 (9/96)