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**May 09 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # P95000013210 (6)

1. Corporation Name
SOUTH FLORIDA SEASIDE RESORTS, INC.



Principal Place of Business 12650 NEW BRITTANY BLVD SUITE 101 FT MYERS FL 33907	Mailing Address 12650 NEW BRITTANY BLVD SUITE 101 FT MYERS FL 33907-3653
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3. Date Incorporated or Qualified 02/16/1995	3a. Date of Last Report 04/09/1996
4. FEI Number 65-0566229	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 3045 ESTERO BLVD Suite, Apt. #, etc. 22 UNIT 9C City & State 23 FORT MYERS BEACH FL Zip 24 33931 Country 25 USA	2a. Mailing Address 26 3045 ESTERO BLVD Suite, Apt. #, etc. 27 UNIT 9C City & State 28 FORT MYERS BEACH FL Zip 29 33931 Country 30 USA
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9. Name and Address of Current Registered Agent SMITH, KATHLEEN A 12650 NEW BRITTANY BLVD SUITE 101 FT MYERS FL 33907				10. Name and Address of New Registered Agent			
81 Name		82 Street Address (P.O. Box Number is Not Acceptable) 2449 JASPER AVE				83	
84 City FORT MYERS		85 Zip Code FL 33907					

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 signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPST	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KOCH, WOLFGANG G	1.2 NAME	
STREET ADDRESS	4745 ESTERO BLVD UNIT 1603-A	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS BEACH FL 33931	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	GORDON B DAVIS
STREET ADDRESS		2.3 STREET ADDRESS	6214 PRESIDENTIAL CT STE G
CITY-ST-ZIP		2.4 CITY-ST-ZIP	FORTMYERS FL 33919
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Gordon B Davis* **DIRECTOR** 4/28/97 (941)4821040

CR2E034 (9/96)