

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

FILED

**Mar 27 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 # P96000054499 (4)
1. Corporation Name
FLORIDA SALT WATER GUIDES, INC.



| | |
|--|---|
| Principal Place of Business 250 BELCHER ROAD NO. STE 102 CLEARWATER FL 34625 | Mailing Address 250 BELCHER ROAD NO. STE 102 CLEARWATER FL 34625-2600 |
|--|---|

| | |
|---|---------------------------------------|
| 3. Date Incorporated or Qualified 06/23/1996 | 3a. Date of Last Report |
| 4. FEI Number 59-3388752 | Applied For 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

| | |
|--------------------------------|-------------------------|
| 2. Principal Place of Business | 2a. Mailing Address |
| 21. Suite Apt. #, etc. | 26. Suite, Apt. #, etc. |
| 22. City & State | 27. City & State |
| 23. Zip | 28. Zip |
| 24. Country | 29. Country |
| 25. Country | 30. Country |

9. Name and Address of Current Registered Agent

**MEISSNER, PAUL
250 BELCHER ROAD NO. STE 102
CLEARWATER FL 34625**

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 signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

| | | |
|-----------------|-------------------------------------|---------------------------------|
| TITLE | D | <input type="checkbox"/> DELETE |
| NAME | MEISSNER, PAUL | |
| STREET ADDRESS | 250 BELCHER ROAD NO. STE 102 | |
| CITY - ST - ZIP | CLEARWATER FL 34625 | |
| TITLE | D | <input type="checkbox"/> DELETE |
| NAME | MEISSNER, JAYNE R | |
| STREET ADDRESS | 250 BELCHER ROAD NO. STE 102 | |
| CITY - ST - ZIP | CLEARWATER FL 34625 | |
| TITLE | D | <input type="checkbox"/> DELETE |
| NAME | CROWN, BRIAN C | |
| STREET ADDRESS | 250 BELCHER ROAD NO. STE 102 | |
| CITY - ST - ZIP | CLEARWATER FL 34625 | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|---------------------|---|
| 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | |
| 1.4 CITY - ST - ZIP | |
| 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | |
| 2.3 STREET ADDRESS | |
| 2.4 CITY - ST - ZIP | |
| 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | |
| 3.4 CITY - ST - ZIP | |
| 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 |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY - ST - ZIP | |
| 6.1 TITLE | |
| 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, 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 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, appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Paul Meissner **PAUL MEISSNER** 3/25/97 Date

CR2E034 (9/96)