

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

FILED
Feb 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000068040 (9)
 1. Corporation Name
BAY MARINA PROPERTY, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 4001 TAMiami TRl.. N. STE. 300 NAPLES FL 34105		Mailing Address 4001 TAMiami TRl.. N. STE. 300 NAPLES FL 34105	
21 Principal Place of Business Suite, Apt. #, etc.	26 Mailing Address Suite, Apt. #, etc.	22 City & State	27 City & State
23 Zip Country	28 Zip Country	24 Zip Country	29 Zip Country

3. Date Incorporated or Qualified
08/06/1997

4. FEI Number
23 2917370

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name
J. Dudley Goodlette, Esquire

82 Street Address (P.O. Box Number is Not Acceptable)
Goodlette, Coleman & Johnson, P.A.

83
4001 Tamiami Trail North, Suite 300

84 City
Naples

85 Zip Code
FL 34103

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: [Signature] DATE: **2/13/98**

12. OFFICERS AND DIRECTORS

TITLE	Director	<input type="checkbox"/> DELETE
NAME	Thomas J. Hickey	
STREET ADDRESS	Suite 718, Bigelow Corp. Center	
CITY-ST-ZIP	Pittsburgh, PA 15219-1945	<input type="checkbox"/> DELETE
TITLE	Director	
NAME	J. Dudley Goodlette	
STREET ADDRESS	4001 Tamiami Trail North, Suite 300	
CITY-ST-ZIP	Naples, FL 34103	<input type="checkbox"/> DELETE
TITLE	Director	
NAME	Daniel C. McGrogan	
STREET ADDRESS	Suite 718, Bigelow Corp. Center	
CITY-ST-ZIP	Pittsburgh, PA 15219-1945	<input type="checkbox"/> DELETE
TITLE	Director	
NAME	Alan H. Finegold	
STREET ADDRESS	6 PPG Place	
CITY-ST-ZIP	Pittsburgh, PA 15222	<input type="checkbox"/> DELETE
TITLE		<input type="checkbox"/> DELETE

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 <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 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: [Signature]

2/13/98

CR2E034 (10/97)