FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **L35938** **(4)**

1. Corporation Name
STUMP PASS MARINA, INC.

Principal Place of Business
3060 PLACIDA RD
ENGLEWOOD FL 34224
US

Mailing Address
3060 PLACIDA RD.
ENGLEWOOD FL 34224
US

3. Date Incorporated or Organized: 12/08/1989
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-2989761 — Applied For / Not Applicable
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. Is the corporation a small business as defined by Florida Statutes 288.703? Yes [X] No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip 24 Country 25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip 29 Country 30

9. Name and Address of Current Registered Agent
HOUSLEYIII, WILLIAM C
3060 PLACIDA RD.
ENGLEWOOD FL 34224

10. Name and Address of New Registered Agent
81 Name: THOMAS DIGNAM
82 Street Address (P.O. Box Number is Not Acceptable): 3060 PLACIDA RD
83
84 City: ENGLEWOOD FL 85 Zip Code: 34224

11. Pursuant to the provisions of Sections 607.0505 and 607.1605, 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. I hereby certify that I am familiar with and accept the obligations of a registered agent under Section 607.0505, Florida Statutes.

SIGNATURE: 4/4/96

12. OFFICERS AND DIRECTORS

TITLE	DCEO	[X] DIRECTOR
NAME	VAN DER NOORD, HARRY	
STREET ADDRESS	1005 RIVERSIDE DRIVE	
CITY-ST-ZIP	PALMETTO FL	
TITLE	DTS	[X] DIRECTOR
NAME	SANTEFORT, THOMAS J.	
STREET ADDRESS	2 MIDAMERICA PLAZA, STE. 722	
CITY-ST-ZIP	OAKBROOK IL	
TITLE	DP	[X] DIRECTOR
NAME	HOUSLEY, WILLIAM C. III	
STREET ADDRESS	1754 BAYSHORE DR	
CITY-ST-ZIP	ENGLEWOOD FL	
TITLE		[ ] DIRECTOR
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DIRECTOR
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DIRECTOR
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

P	THOMPSON, MICHAEL 3960 W. Market Street Akron, OHio 44333	[ ] Change [X] Addition
V	DIGNAM, THOMAS 1201 S. McCall Rd. ENGLEWOOD, FL 34223	[ ] Change [X] Addition
S	VAN DER NOORD, HARRY 1005 RIVERSIDE DRIVE PALMETTO FL	[ ] Change [X] Addition
		[ ] Change [ ] Addition
		[ ] Change [ ] Addition
		[ ] Change [ ] Addition

14. I do hereby certify that the information supplied with this report, including any attachments, is true and accurate and that the corporation is in compliance with the requirements of Section 607.0505 of Florida Statutes. I further certify that the information indicated on this report or supplemental attachment, if any, is true and accurate and that, subsequent to the filing of this report, any change in the information required by Section 607.0505 of Florida Statutes will be filed within the prescribed time period. I further swear or affirm that I am an officer or director of the corporation, or the trustee of a trust empowered to act on behalf of the corporation pursuant to Section 607.0505, Florida Statutes, and that my name appears in Block 12 or Block 13 above, or I have attached a separate list containing the required information.

SIGNATURE: 4/4/96 (941) 697-3600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)