


FILE NOW: FILING FEE IS \$61.25

**FILED**  
Feb 27, 1999 8:00 am  
Secretary of State

02-27-1999 90090 004 \*\*\*\*61.25

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<b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b>				<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # 700835</b>					
1. Corporation Name <b>THE SAILFISH CLUB OF FLORIDA, INC.</b>					
Principal Place of Business 1338 N. LAKE TRAIL PALM BEACH FL 33480-3031			Mailing Address 1338 N. LAKE TRAIL PALM BEACH FL 33480-3031		



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		04/18/1960	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-0432073	
24 Country		29 Country		30	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Election Campaign Financing <input type="checkbox"/>				\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
PIERINO, VINCENT III % SAILFISH CLUB 1338 N. LAKE TRAIL PALM BEACH FL 33480				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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: *[Signature]* General Manager  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE: VD <input checked="" type="checkbox"/> DELETE NAME: METZGER, THEODORE G STREET ADDRESS: 1338 NORTH LAKE TRAIL CITY-ST-ZIP: PALM BEACH FL				1.1 TITLE: VP/T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME: MICHEL, GEORGE J. 1.3 STREET ADDRESS: 310 Mediterranean Rd. 1.4 CITY-ST-ZIP: Palm Beach FL 33480			
TITLE: VD <input type="checkbox"/> DELETE NAME: FLAGG, JOHN E. STREET ADDRESS: 219 MURRAY ROAD CITY-ST-ZIP: WEST PALM BEACH FL 33405				2.1 TITLE: VP/MEMBERSHIP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2.2 NAME: DOWELL, W. ANTHONY 2.3 STREET ADDRESS: 101 East Inlet Dr. 2.4 CITY-ST-ZIP: Palm Beach FL 33480			
TITLE: PD <input checked="" type="checkbox"/> DELETE NAME: MURPHY, MARTIN E STREET ADDRESS: 1338 NORTH LAKE TRAIL CITY-ST-ZIP: PALM BEACH FL				3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.3 STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.4 CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE: SD <input type="checkbox"/> DELETE NAME: WARWICK, CHARLES H. STREET ADDRESS: 218 TANGIER AVE. CITY-ST-ZIP: PALM BEACH FL 33480				4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.3 STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.4 CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE: AD <input type="checkbox"/> DELETE NAME: BUSSEY, EDWIN O JR STREET ADDRESS: 130 DOLPHIN RD CITY-ST-ZIP: PALM BEACH FL				5.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.3 STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.4 CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE: P <input type="checkbox"/> DELETE NAME: MCCANN, FRANK J STREET ADDRESS: 1338 N LAKE TRAIL CITY-ST-ZIP: PALM BEACH FL 33480-3031				6.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.3 STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.4 CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition			

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
 MICHEL, DR 1/14/99 561-444-0206  
 Date Daytime Phone #

CR2E037 (11/98)