

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

FILED

Apr 10 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 # 176301 (0)
 1. Corporation Name
THE MAYAN BEACH CLUB, INC.

Principal Place of Business 1850 S OCEAN LANE FT LAUDERDALE FL 33316	Mailing Address 1850 S OCEAN LANE FT LAUDERDALE FL 33316
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified 12/01/1953	
4. FEI Number 59-0729664		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		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent DONALD N. SCHIMMER 1850 S. OCEAN LANE FT. LAUDERDALE FL 33316				10. Name and Address of New Registered Agent 81 Name JOHN R. THORNBURY 82 Street Address (P.O. Box Number is Not Acceptable) 1850 S Ocean Lane 83 84 City FT. LAUDERDALE FL 85 Zip Code 33316			
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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 *John R. Thornbury* **John R. Thornbury President 4-6-98**
 (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SCHIMMER, DONALD S.		1.2 NAME	THORNBURY, JOHN R.			
STREET ADDRESS	1850 S. OCEAN LANE		1.3 STREET ADDRESS	1850 S. OCEAN LANE			
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33316			
TITLE	VD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	THORNBURY, JOHN R		2.2 NAME	SCHIMMER, DONALD N.			
STREET ADDRESS	1850 S OCEAN LN		2.3 STREET ADDRESS	1850 S. OCEAN LANE			
CITY-ST-ZIP	FT LAUDERDALE FL		2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33316			
TITLE	VD	<input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MASPERSON, JOAN W.		3.2 NAME				
STREET ADDRESS	1850 S OCEAN LANE		3.3 STREET ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4 CITY-ST-ZIP				
TITLE	TD	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	CLAEYS, DON H.		4.2 NAME	CLAEYS JERRY			
STREET ADDRESS	1850 S. OCEAN LANE		4.3 STREET ADDRESS	1850 S. OCEAN LANE			
CITY-ST-ZIP	FT. LAUDERDALE FL		4.4 CITY-ST-ZIP	FT. LAUDERDALE, FL. 33316			
TITLE	SD	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	ELLIOTT, BARBARA W.		5.2 NAME	THONBURY, JULIA M.			
STREET ADDRESS	1850 S. OCEAN LANE		5.3 STREET ADDRESS	1850 S. OCEAN LANE			
CITY-ST-ZIP	FT. LAUDERDALE FL		5.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33316			
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 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: *John R. Thornbury* **JOHN R. THORNBURY-PD** **954-523-8245**

CR2034 (10/97)