

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

FILED  
Apr 22 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **334368** (8)

1. Corporation Name  
**YACHT HOPE CORPORATION**

Principal Place of Business <b>340 ROYAL POINCIANA PLAZA PALM BEACH FL 33480 US</b>	Mailing Address <b>P.O. BOX 2675 PALM BEACH FL 33480-2675 US</b>
--	---



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>08/26/1968</b>	3a. Date of Last Report <b>04/05/1996</b>
21		26		4. FEI Number <b>59-1218055</b>	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip	Country	Zip	Country		
24		29			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
<b>FROST, GEORGE 915 MACY STREET WEST PALM BEACH FL 33405</b>				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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HYNES, JAMES E</b>	1.2 NAME	
STREET ADDRESS	<b>6525 MORRISON BLVD.</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CHARLOTTE NC</b>	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HARRELL, HENRY</b>	2.2 NAME	
STREET ADDRESS	<b>1300 RIVER ROAD, W.</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MANAKIN-SABOT VA</b>	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DICKSON, STUART R.</b>	3.2 NAME	
STREET ADDRESS	<b>20002 FIRST UNION PLAZA</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CHARLOTTE NC</b>	3.4 CITY-ST-ZIP	
TITLE	ST <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FROST, GEORGE</b>	4.2 NAME	
STREET ADDRESS	<b>915 MACY ST.</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>W.P.B. FL</b>	4.4 CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MAASS, HAROLD G.</b>	5.2 NAME	
STREET ADDRESS	<b>321 ROYAL POINCIANA PLZ</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PALM BCH. FL</b>	5.4 CITY-ST-ZIP	
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 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. 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 from an attachment with an address.

SIGNATURE: *George Frost* SECRETARY & TREASURER 561-582-7381  
APR 16 1997 Daytime Phone # 134068