

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

FILED
May 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 348914 (3)
1. Corporation Name
BAREFOOT BAY CORPORATION

Principal Place of Business Mailing Address
255 ALHAMBRA CIRCLE 255 ALHAMBRA CIRCLE
9TH FL 9TH FL
CORAL GABLES FL 33134-5102 CORAL GABLES FL 33134-5102



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		07/02/1969	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-1281126	
24 Country		29 Country		5. Certificate of Status Desired	
				X \$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.	
				X Yes [] No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
KERRIGAN, JUANITA I. 255 ALHAMBRA CIRCLE 9TH FL. CORAL GABLES FL 33134				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	T	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	T	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	COLDTIZ, LAWRENCE L			1.2 NAME	RAMA, MICHAEL		
STREET ADDRESS	255 ALHAMBRA CIR.			1.3 STREET ADDRESS	255 ALHAMBRA CIRCLE		
CITY-ST-ZIP	CORAL GABLES FL			1.4 CITY-ST-ZIP	CORAL GABLES, FL 33134		
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	PREVATT, SONNIE			2.2 NAME			
STREET ADDRESS	255 ALHAMBRA CIR.			2.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL GABLES FL			2.4 CITY-ST-ZIP			
TITLE	PD	<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MCAIRY, CHARLES			3.2 NAME			
STREET ADDRESS	255 ALHAMBRA CIR.			3.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL GABLES FL			3.4 CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KERRIGAN, JUANITA I.			4.2 NAME			
STREET ADDRESS	255 ALHAMBRA CIR.			4.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL GABLES FL			4.4 CITY-ST-ZIP			
TITLE	VD	<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GETMAN, DENNIS J.			5.2 NAME			
STREET ADDRESS	255 ALHAMBRA CIR.			5.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL GABLES FL			5.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SETTLES, G. PATRICK			6.2 NAME			
STREET ADDRESS	255 ALHAMBRA CIR.			6.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL GABLES FL			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]* Date: *5/14/98*

CR2E034 (10/97)