

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 412685 (0)

1. Corporation Name

MANATEE AROUND THE WORLD TRAVEL, INC.



Principal Place of Business

**5642 CORTEZ RD. W.
5642 CORTEZ ROAD W.
BRADENTON FL 34210-2819
US**

Mailing Address

**5642 CORTEZ RD. W.
BRADENTON FL 34210 -2819
US**

2. Principal Place of Business

21 State Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 State Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**BLALOCK, LANDERS, WALTERS & VOGLER, PA
802-11TH STREET W.
BRADENTON FL 34205**

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 607.0503, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD	[] DELETE
NAME	RIEGLER, SANTA N	
STREET ADDRESS	607 51 ST NW	
CITY-STATE-ZIP	BRADENTON FL 34209	
TITLE	VTD	[] DELETE
NAME	NICOSIA, RALPH	
STREET ADDRESS	5300 GULF DR	
CITY-STATE-ZIP	HOLMES BCH FL 34218	
TITLE	SD	[] DELETE
NAME	BLALOCK, ROBERT G	
STREET ADDRESS	802 11 ST W	
CITY-STATE-ZIP	BRADENTON FL 34205	
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	[] Change [] Addition
1. NAME	
1. STREET ADDRESS	
1. CITY-STATE-ZIP	
2. TITLE	[] Change [] Addition
2. NAME	
2. STREET ADDRESS	
2. CITY-STATE-ZIP	
3. TITLE	[] Change [] Addition
3. NAME	
3. STREET ADDRESS	
3. CITY-STATE-ZIP	
4. TITLE	[] Change [] Addition
4. NAME	
4. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	[] Change [] Addition
5. NAME	
5. STREET ADDRESS	
5. CITY-STATE-ZIP	
6. TITLE	[] Change [] Addition
6. NAME	
6. STREET ADDRESS	
6. CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplement 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 registered agent or person 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 omitted from the new filing address.

SIGNATURE: *Santa N. Riegler*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Santa N. Riegler, President

4/5/96 941-795-7724

CR2E034 (12/95)