

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

FILED  
Mar 30 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 # 588796 (3)  
1. Corporation Name  
MAX BOOKE OF FLORIDA, INC.

Principal Place of Business Mailing Address  
2110 SAWGRASS VILLAGE DRIVE 2110 SAWGRASS VILLAGE DRIVE  
PONTE VEDRA FL 32082 PONTE VEDRA FL 32082



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.		10/06/1978	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-1857227	
24 Country		29 Country		5. Certificate of Status Desired	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				Applied For	
				Not Applicable	
				6. Election Campaign Financing Trust Fund Contribution	
				7. Additional Fee Required	
				\$8.75	
				\$5.00 May Be Added to Fees	
				Yes No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BOOKE, MAX				81 Name			
73 PLAYERS CLUB VILLAS				82 Street Address (P.O. Box Number is Not Acceptable)			
PONTE VEDRA BEACH FL 32082				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 \_\_\_\_\_ DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PTD	DELETE		1.1 TITLE	Change Addition		
NAME	BOOKE, MAX			1.2 NAME			
STREET ADDRESS	73 PLAYERS CLUB VILLAS			1.3 STREET ADDRESS			
CITY-ST-ZIP	PONTE VEDRA FL			1.4 CITY-ST-ZIP			
TITLE	VSD	DELETE		2.1 TITLE	Change Addition		
NAME	BOOKE, MARLETTE H.			2.2 NAME			
STREET ADDRESS	73 PLAYERS CLUB VILLAS			2.3 STREET ADDRESS			
CITY-ST-ZIP	PONTE VEDRA FL			2.4 CITY-ST-ZIP			
TITLE		DELETE		3.1 TITLE	Change Addition		
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		DELETE		4.1 TITLE	Change Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		DELETE		5.1 TITLE	Change Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		DELETE		6.1 TITLE	Change 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, changed, or on an attachment with an address.

SIGNATURE: *Max Booke* 3/14/98 904/2814011

CR2E034 (10/97)