

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
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DOCUMENT # 649685 (5)
1. Corporation Name
INDIAN COVE MARINA, INC.

Principal Place of Business
14 MYRTICE AVENUE
MERRITT ISLAND FL 32953

Mailing Address
261 ARNOLD PALMER DR.
DAVENPORT FL 33837



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 96 Willard St		12/28/1979	
22 City & State		27 302		4. FEI Number	
23 Zip		28 COCOA FL		59-1982269	
24 Country		29 32922		5. Certificate of Status Desired	
		30 US		6. Election Campaign Financing	
				Trust Fund Contribution	
				8. This corporation owes or has paid the current year Intangible	
				Personal Property Tax due June 30.	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
FRANK DELLE 261 ARNOLD PALMER DR. DAVENPORT FL 33837		81 Name Richard S. Amari	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83 96 Willard St Suite 302	
		84 City COCOA	
		85 Zip Code FL 32922	

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 *Richard S. Amari* DATE 2/25/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D, P
NAME	DELLE, KARIN	1.2 NAME	Richard S. Amari
STREET ADDRESS	261 ARNOLD PALMER DR.	1.3 STREET ADDRESS	96 Willard St Suite 302
CITY-ST-ZIP	DAVENPORT FL 33837	1.4 CITY-ST-ZIP	COCOA FL 32922
TITLE	SVD	2.1 TITLE	D, S, T
NAME	DELLE, ELIZABETH	2.2 NAME	James S. Theriac, III
STREET ADDRESS	261 ARNOLD PALMER DR.	2.3 STREET ADDRESS	96 Willard St Suite 302
CITY-ST-ZIP	DAVENPORT FL 33837	2.4 CITY-ST-ZIP	COCOA, FL 32922
TITLE	D	3.1 TITLE	
NAME	DELLE, FRANK III	3.2 NAME	
STREET ADDRESS	831 HARBOR CIRCLE	3.3 STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	DELLE, MARC	4.2 NAME	
STREET ADDRESS	325 PARK COURT	4.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER GARDEN FL	4.4 CITY-ST-ZIP	
TITLE	PD	5.1 TITLE	
NAME	DELLE, FRANK	5.2 NAME	
STREET ADDRESS	261 ARNOLD PALMER DR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	DAVENPORT FL 33837	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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: *Richard S. Amari* Pres DATE 2/25/98

CR2E034 (10/97)