

FILE NOW: FILING FEE IS \$61.25

FILED
May 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 719305 (5)
 1. Corporation Name
MARINE TOWER YACHT CLUB, INC.



Principal Place of Business 2500 E LAS OLAS BLVD FORT LAUDERDALE FL 33301	Mailing Address 2500 E LAS OLAS BLVD FORT LAUDERDALE FL 33301-1508
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/15/1970		3a. Date of Last Report 03/11/1996	
21	26	4. FEI Number 23-7130107		Applied For		Not Applicable	
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired No <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution No <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Zip	25. Country	29. Zip	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BRADBURY, GERALD A. 2500 EAST LAS OLAS BLVD. FT. LAUDERDALE FL 33301				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOVERRO, JOHN	1.2 NAME	
STREET ADDRESS	2500 E LAS OLAS BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BILLINGS, MELVIN	2.2 NAME	
STREET ADDRESS	2500 E. LAS OLAS BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	2.4 CITY-ST-ZIP	
TITLE	DT <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRADBURY, GERALD A	3.2 NAME	
STREET ADDRESS	2500 E LAS OLAS BLVD	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NAPIER, STAN	4.2 NAME	
STREET ADDRESS	2500 E LAS OLAS BLVD	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HIRSCH, TERESA	5.2 NAME	
STREET ADDRESS	2500 E. LAS OLAS BLVD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Stan Napier **RECEIVED NAPIER** 05/10/97 462-4487
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0035254

CR2E037 (9/96)