

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 810843 (3)
 1. Corporation Name
BISCAYNE SEA CLUB

Principal Place of Business 8000 E DRIVE NORTH BAY VILLAGE MIAMI BEACH FL 33141		Mailing Address 8000 E DRIVE NORTH BAY VILLAGE MIAMI BEACH FL 33141	
21	2. Principal Place of Business Suite, Apt #, etc.	26	2a. Mailing Address Suite, Apt #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25		30	Country

3. Date Incorporated or Qualified
02/28/1956

4. FEI Number
59-0787519

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No



9. Name and Address of Current Registered Agent

JAFFE, LEAH S
8000 EAST DR, APT 108
N. BAY VILLAGE FL 33141

10. Name and Address of New Registered Agent

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 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD <input type="checkbox"/> DELETE	1.1 TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JAFFEE, LEAH S	1.2 NAME	Robert Sands
STREET ADDRESS	8000 EAST DR., STE. 205	1.3 STREET ADDRESS	8020 East Dr. Apt. 214
CITY-ST-ZIP	N BAY VILLAGE, FL 00000	1.4 CITY-ST-ZIP	N. Bay Village, FL 33141
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHESLEY, JOSEPHINE	2.2 NAME	Fabio Pinheiro
STREET ADDRESS	8010 E. DR. #307	2.3 STREET ADDRESS	8020 East Dr. Apt. 218
CITY-ST-ZIP	N. BAY VILLAGE FL	2.4 CITY-ST-ZIP	N. Bay Village, FL 33141
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CAICEDO, HARRY	3.2 NAME	Jacqueline Varone
STREET ADDRESS	8010 E. DR. #207	3.3 STREET ADDRESS	8000 East dr. Apt. 306
CITY-ST-ZIP	N. BAY VILLAGE FL	3.4 CITY-ST-ZIP	N. Bay Village, FL 33141
TITLE	T <input checked="" type="checkbox"/> DELETE	4.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MOLWAY, MARJORIE	4.2 NAME	William Lachowyn
STREET ADDRESS	8200 EAST DR. #117	4.3 STREET ADDRESS	8010 East dr. Apt. 108
CITY-ST-ZIP	N. BAY VILLAGE FL	4.4 CITY-ST-ZIP	N. Bay Village, FL 33141
TITLE	DVP <input checked="" type="checkbox"/> DELETE	5.1 TITLE	TREASURER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENABIB, ELIAS	5.2 NAME	LARRY WEAVER
STREET ADDRESS	8010 E. DR. #201	5.3 STREET ADDRESS	8020 EAST DR. Apt. 217
CITY-ST-ZIP	N. BAY VILLAGE FL	5.4 CITY-ST-ZIP	N. BAY VILLAGE FL 33141
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEAVER, LARRY	6.2 NAME	
STREET ADDRESS	8020 E. DR. #217	6.3 STREET ADDRESS	
CITY-ST-ZIP	N. BAY VILLAGE 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Leah S. Jaffe 3/30/98 305-757-0539

CR2E037 (10/97)