

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 13 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 # F96000002185 (4)

1. Corporation Name

920 INTRACOASTAL, INC.



Principal Place of Business 920 INTRACOASTAL DR FT LAUDERDALE FL 33304	Mailing Address 920 INTRACOASTAL DR FT LAUDERDALE FL 33304
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3. Date Incorporated or Qualified 04/29/1996
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4. FEI Number 59-1441199	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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2. Principal Place of Business 21 Suite, Apt #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent CASEY, JOHN F 920 INTRACOASTAL DR #24 FT LAUDERDALE FL 33304
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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 *John F. Casey* (NOTE: Registered Agent signature required when reinstating) **FEB, 4, 1998**

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DCP	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WHEATON, RICHARD J		1.2 NAME		
STREET ADDRESS	920 INTRACOASTAL DR #5		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33304		1.4 CITY-ST-ZIP		
TITLE	DV	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CASEY, JOHN F		2.2 NAME		
STREET ADDRESS	920 INTRACOASTAL DR #24		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33304		2.4 CITY-ST-ZIP		
TITLE	DST	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHAFER, JAY		3.2 NAME		
STREET ADDRESS	920 INTRACOASTAL DR #28		3.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33304		3.4 CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BRIGGS, MARGARET		4.2 NAME		
STREET ADDRESS	920 INTRACOASTAL DR #2		4.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33304		4.4 CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	GRAYSON, MARJORIE		5.2 NAME	D WHEATON SHARKEY, HELEN	
STREET ADDRESS	920 INTRACOASTAL DR #8		5.3 STREET ADDRESS	920 INTRACOASTAL DR #27	
CITY-ST-ZIP	FT LAUDERDALE FL 33304		5.4 CITY-ST-ZIP	FT LAUDERDALE FL 33304	
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 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: *Richard J. Wheaton* **RICHARD J. WHEATON** 317-257-5494 2-4-98 954-565-7358

CR2E037 (10/97)