

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

PROFIT CORPORATION ANNUAL REPORT 1999 AMENDED		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # H69815			
1. Corporation Name INTRACOASTAL MARINA OF MELBOURNE, INC.			
Principal Place of Business 705 S. U.S. 1 Melbourne, FL 32901		Mailing Address 705 S. U.S. 1 Melbourne, FL 32901	
2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
ROMANDETTI, CHARLES C. 705 S. U.S. 1 Melbourne, FL 32901		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 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	DST
NAME	ROMANDETTI, CHARLES C.	12 NAME	ROMANDETTI, CHARLES C.
STREET ADDRESS	705 S. U.S. 1	13 STREET ADDRESS	705 S. U.S. 1
CITY-ST-ZIP	Melbourne, FL 32901	14 CITY-ST-ZIP	Melbourne, FL 32901
TITLE	STD	21 TITLE	DV
NAME	VLEIGENTHART, D.	22 NAME	VLEIGENTHART, DONALD H.
STREET ADDRESS	705 S. U.S. 1	23 STREET ADDRESS	705 S. U.S. 1
CITY-ST-ZIP	Melbourne, FL 32901	24 CITY-ST-ZIP	Melbourne, FL 32901
TITLE	V	31 TITLE	DP
NAME	ROMANDETTI, CHRISTIAN	32 NAME	ROMANDETTI, CHRISTIAN C.
STREET ADDRESS	705 S. U.S. 1	33 STREET ADDRESS	705 S. U.S. 1
CITY-ST-ZIP	Melbourne, FL 32901	34 CITY-ST-ZIP	Melbourne, FL 32901
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Chris Romanetti x 6/4/99 x 407 728 2010

Daytime Phone #

CR2E034 (11/98)