FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APR 10 '95
9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J03337 (9)

1. Corporate Name
SONNY'S ON THE LAKE, INC.

Principal Address
201 FISHERMAN'S WHARF
FORT PIERCE FL 34950

Mailing Address
201 FISHERMAN'S WHARF
FORT PIERCE FL 34950

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/11/1986
3a. Date of Last Report: 04/22/1994

4. FEI Number: 16-1060068 — Applied For / Not Applicable

5. Certificate of Status Desired: $8.75 Additional Fee Required

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

9. Name and Address of Current Registered Agent
BECHT, EDWARD W.
321 S 2ND ST
FORT PIERCE FL 34950

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. [illegible] 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 obligation of [illegible] Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
	P		Change / Addition
NAME	ZODA, SANTO J.	NAME	
STREET ADDRESS	201 FISHERMAN'S WHARF	STREET ADDRESS	
CITY	FORT PIERCE FL	CITY	
	VS		Change / Addition
NAME	ZODA, RITA	NAME	
STREET ADDRESS	% 201 FISHERMAN'S WHARF	STREET ADDRESS	
CITY	FORT PIERCE FL	CITY	
NAME		NAME	Change / Addition
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
NAME		NAME	Change / Addition
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
NAME		NAME	Change / Addition
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
NAME		NAME	Change / Addition
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07 (3) (ii), 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: Santo J. Zoda 4/21/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0378292 CP