

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J46216

1. Corporation Name

THE BLUFFS MARINA, INC.

Principal Place of Business

Mailing Address

1320 Tidal Pointe Blvd.
Jupiter, FL 33477

800001835528
-05/22/96--01110--059
***200.00

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 1320 Tidal Pointe Blvd.		26 As Above		12/23/86		05/01/95	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number		Applied For	
23 City & State		28 City & State		59-2762677		Not Applicable	
24 Zip		25 Country		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
26 Zip		27 Country		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
28 Zip		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
30 Zip		31 Country					

9. Name and Address of Current Registered Agent

H. James Azar
1320 Tidal Pointe Blvd.
Jupiter, FL 33477

10. Name and Address of New Registered Agent

81 Name: Annee E. Azar
82 Street Address (P.O. Box Number is Not Acceptable): 5022 S.E. Inkwood Way
83
84 City: Hobe Sound FL 85 Zip Code: 33455

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: ANNEE E. AZAR DATE: 4-25-96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	1.1 TITLE	President
NAME	Harry James Azar	1.2 NAME	Wilfred T. Azar
STREET ADDRESS	1320 Tidal Pointe Blvd.	1.3 STREET ADDRESS	114 Azar Acres Lane
CITY-ST-ZIP	Jupiter, FL 33477	1.4 CITY-ST-ZIP	Queenstown, MD 21658
TITLE		2.1 TITLE	Vice-President
NAME		2.2 NAME	Mary Frances Azar
STREET ADDRESS		2.3 STREET ADDRESS	114 Azar Acres Lane
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Queenstown, MD 21658
TITLE		3.1 TITLE	Secretary/Treasurer
NAME		3.2 NAME	Annee E. Azar
STREET ADDRESS		3.3 STREET ADDRESS	5022 S.E. Inkwood Way
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Hobe Sound, FL 33455
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: ANNEE E. AZAR DATE: 4/25/96 407-637-6688

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE DAYTIME PHONE #

CR2E034 (12/95)