

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K09629 (2)

1. Corporation Name

AQUARINA CLUB CORPORATION



Principal Place of Business

235 HAMMOCK SHORE DR.
MELBOURNE BEACH FL 32951

Mailing Address

235 HAMMOCK SHORE DR.
MELBOURNE BEACH FL 32951

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

9. Name and Address of Current Registered Agent

PEEPLES, JAMES W., III
505 N. ORLANDO AVE.
COCOA BEACH FL 32931

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

12/30/1987

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2862737

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81

Name

Monrie McDaniel

82

Street Address (P.O. Box Number is Not Acceptable)

235 Hammock Shore Drive

83

Melbourne Beach, FL 32951

84

City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.07(2) and 607.15(8), 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 607.05(6), Florida Statutes.

SIGNATURE

Monrie McDaniel

(Signature of Agent must be typed and printed below)

3/21/96

Date

12. OFFICERS AND DIRECTORS

TITLE

DPT
LIEBERWIRTH, JUERGEN
7535 SOUTH HWY. A1A
MELBOURNE BCH. FL

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

D
PEEPLES, JAMES W
505 N ORLANDO AVE
COCOA BEACH FL

☒ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-ST-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-ST-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-ST-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-ST-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/21/96

Date

CR2E034 (12/95)