File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. 99 HAY -3 AM 9: 1:0 FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # 198000000839** BOATCLUBSAMERICA, L.L.C. SANDALWOOD SQUARE SANDALWOOD SQUARE 4760 TAMIAMI TRAIL NORTH, SUITE 6 4760 TAMIAMI TRAIL NORTH, SU NAPLES FL 34103 NAPLES FL 34103 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 06/22/1998 FL Suite. Apt. #. etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Zip Country Zip \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office VOGEL, JAMES D C/O VOGEL, DAVIS & VOGEL, P.A. Street Address (P.O. Box Number is Not Acceptable) 3936 TAMIAMI TRAIL NORTH, SUITE B NAPLES FL 34103 Suite Apt #, etc Z₁o Code 9. Pursuant to the provisions of Sections 608 416 and 608 508. Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE DATE (Registered Agent A wepting Appendment, INCR). He je tired Agent sojnalnic in gone it when remaining 10. Title Managing Members/Managers Business Street Address City, State and Zip Code MGR RUFF, EDWARD J 4760 TAMIAMI TRAIL NORTH, NAPLES FL RUFF, PATRICK NAPLES FL MGR 1330 RAILHEAD, SUITE 3 SHEPARD, GREGORY MGR 625 STANWIX STREET PITTSBURGH PA 2460002871972---B \_nsztpz99---(1)007--004 \*\*\*\*188 75 \*\*\*\*188.79 11 Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. Hurther certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an

attachment with an address SIGNATURE:

INHSE 10 R (12-98)