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 # **M85655** **(2)**

1. Corporation Name

BANANA COVE MARINA, INC.

Principal Place of Business	Mailing Address
BANANA COVE MARINA ~~1375 SCORPIOUS COURT~~ ~~MERRITT ISLAND FL 32953~~ US	~~660 URANUS AVE~~ ~~1375 SCORPIOUS COURT~~ ~~MERRITT ISLAND FL 32953~~ US

3. Date Incorporated or Qualified: 06/08/1988
3a. Date of Last Report: 06/09/1995

2. Principal Place of Business
21: 28785 State Rd 19
22: Suite, Apt. #, etc
23: Tavares FL
24: Zip 32778
25: Country Lake

2a. Mailing Address
26: 60 URANUS AVE
27: Suite, Apt. #, etc
28: Merritt Island FL
29: Zip 32953
30: Country Brevard

4. FEI Number: 59-2895693 ☐ 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

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

9. Name and Address of Current Registered Agent

WILSON, DENNIS
~~1375 SCORPIOUS COURT~~
MERRITT ISLAND FL 32953

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 60 URANUS AVE.
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 _____ DATE _____

12. OFFICERS AND/OR DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND/OR DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1.1 TITLE	☒ Change	☐ Addition
NAME	WILSON, DENNIS		1.2 NAME		
STREET ADDRESS	~~1375 SCORPIOUS COURT~~		1.3 STREET ADDRESS	60 URANUS AVE	
CITY-ST-ZIP	MERRITT ISLAND FL		1.4 CITY-ST-ZIP		
TITLE	DTS	☐ DELETE	2.1 TITLE	☒ Change	☐ Addition
NAME	WILSON, JEANNE		2.2 NAME		
STREET ADDRESS	~~1375 SCORPIOUS COURT~~		2.3 STREET ADDRESS	60 URANUS AVE	
CITY-ST-ZIP	MERRITT ISLAND FL		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE	☒ Change	☐ Addition
NAME	~~EILSON, HOLLEY~~		3.2 NAME	WILSON, HOLLEY	
STREET ADDRESS	60 URANUS AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND FL		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	☐ Change	☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	☐ Change	☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	☐ Change	☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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)(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.

SIGNATURE: DJW Dennis John Wilson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____