


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # M92189 (3) 1. Corporation Name D & R YACHT SALES, INC.			
Principal Place of Business 290 N FEDERAL HWY STUART FL 34994 US		Mailing Address 290 N FEDERAL HWY STUART FL 34994 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
9. Name and Address of Current Registered Agent BUCHHEIT, DOUGLAS 290 N FEDERAL HWY. STUART FL 34994		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL	
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 _____ <small>Signature typed or printed name of registered agent and firm if applicable. (NOTE: Registered Agent's signature required when resigning.)</small>			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DCO	11 TITLE	
NAME	BUCHHEIT, DOUGLAS	12 NAME	
STREET ADDRESS	290 N FEDERAL HWY	13 STREET ADDRESS	
CITY - ST - ZIP	STUART FL	14 CITY - ST - ZIP	
TITLE	PD	21 TITLE	
NAME	BIRD, RICHARD L.	22 NAME	
STREET ADDRESS	290 N FEDERAL HWY	23 STREET ADDRESS	
CITY - ST - ZIP	STUART FL	24 CITY - ST - ZIP	
TITLE	ST	31 TITLE	
NAME	BUCHHEIT, JEANNINE S.	32 NAME	
STREET ADDRESS	290 N FEDERAL HWY	33 STREET ADDRESS	
CITY - ST - ZIP	STUART FL	34 CITY - ST - ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: <i>Jeannine S. Buchheit</i>		6/3/96 692-9511	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Date of Filing	



CR2E034 (3/96)