

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Aug 12 1996 8:00 am
Secretary of State

DOCUMENT # N95000004836 (1)

1. Corporation Name

FISHING HALL OF FAME, INC.

Principal Place of Business

687 MASON AVENUE
DAYTONA BEACH FL 32117

Mailing Address

687 MASON AVENUE
DAYTONA BEACH FL 32117

3. Date Incorporated or Qualified
10/12/1995

3a. Date of Last Report

4. FEI Number

59-3240272

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

2. Principal Place of Business

2a. Mailing Address

21 1800 W. International Speedway

26 1800 W. International Speedway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Bldg 1A

27 Bldg 1A

City & State

City & State

23 Daytona Bch FL

28 Daytona Bch FL

Zip

Country

Zip

Country

24 32114

25 USA

29 32114

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVENUE
DAYTONA BEACH FL 32114

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

CHAIRMAN
BROWN, STEPHEN E
687 MASON AVENUE
DAYTONA BEACH FL 32117

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
SIEBERT, OL. WILLIAM
687 MASON AVENUE
DAYTONA BEACH FL 32117

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
TUTEN, RICHARD L
687 MASON AVENUE
DAYTONA BEACH FL 32117

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETED
Keltner, Doralynn N
681 Mason Ave
Daytona Bch FL 32114

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

SECRETRE
ORTOLANI, John A
1430 MASON AVE
Daytona Bch FL 32117

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETED

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

\$ BANK

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)(b), 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 or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0001208

CR2E037 (3/96)