AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9700002441 (0)

SUN HARBOR YACHT CLUB, INC.

FILED

98 OCT 27 AMII: 30

SECRETARY OF STATE TALLAHASSEE. FLORIDA

Principal Place of Business	Mailing Address		
2641 NE 15TH STREET	15TH STREET 2641 NE 15TH STREET		3. Date Incorporated or Qualified
P.O. BOX 1751	P.O. BOX 1751		04/11/1996
POMPANO BEACH FL 33061	POMPANO BEACH FL 33061		4. FEI Number Applied For
			65-0683254 Not Applicable
Principal Place of Business 1	2a. Mailing Address		5. Certificate of Status Desired \$8.75 Additional Fee Required
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be
22	27		Trust Fund Contribution Added to Fees
City & State	City & State		7. Is this nonprofit corporation a homeowners association? Yes No
Zip Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 25	29 3	0	Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent			10. Name and Address of New Registered Agent
		81 Name	
LINDQUIST, MARIAN A 1975 E SUNRISE BLVD #625A		82 Street Addre	ess (P.O. Box Number is Not Acceptable)
FT. LAUDERDALE FL 33304		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			
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		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD	DELETE		EAN LARUE Change Addition
NAME FERRETTI, COSIMO		1.2 NAME 2 2 -	199 NE 15th ST
STREET ADDRESS 2731 NE 15TH STREET			
cmyst-zip POMPANO BEACH FL 33062			
TITLE DV	DELETE	2.1 TITLE + 135 +	AROLD DENBLEYKER Change Addition
NAME TOLOMEO, HARRY		2.2 NAME	535 NE 16THST
STREET ADDRESS 2731 NE 15TH STREET			
CITY-ST-ZIP POMPANO BEACH FL 33062		2.4 CITY-ST-ZIP	MPAND FI. 3366Z
TITLE D	DELETE	3.2 NAME	Change Addition
NAME ENZWEILER, NORBERT			4000026787248
STREET ADDRESS 2801 NE 15 STREET		3.3 STREET ADDRESS	-11/03/9801024023
CITY-ST-ZIP POMPANO BEACH FL 33062		3.4 CITY-ST-ZIP 4.1 TITLE	******\$1. 25 ******\$1. 25 Change 1 Addition
10.	DELETE	4.2 NAME	Change Addition
NAME LINDQUEST, JOHN		4.3 STREET ADDRESS	
STREET ADDRESS 2753 NE 15 STREET			
CITY-ST-ZIP POMPANO BEACH FL 33062	[]	4.4 CITY-ST-ZIP 5.1 TITLE	Change Addition
1 150	DELETE	5.2 NAME	L Criange Addition
NAME KAVANAUGH, MICHAEL STREET ADDRESS 2783 NE 15TH STREET		***	
STREET ADDRESS 2783 NE 1514-STREET		5.3 STREET ADDRESS	

14. I hereby certify that the Information supplied with this filling 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 am an officer or director of the corporation of the c

5,4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

SIGNATURE:

CITY-ST-ZIF

POMPANO BEACH FL 33061