


**FILED**  
**Mar 16, 1999 8:00 am**  
**Secretary of State**

03-16-1999 90133 039 \*\*\*\*61.25

<b>NONPROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1999</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> <b>Secretary of State</b> <b>DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT # N98000004711</b> 1. Corporation Name <b>GULF HUNTER SAILING ASSOCIATION, INCORPORATED</b>			
Principal Place of Business P.O. BOX 7138 BRADENTON FL 34210		Mailing Address P.O. BOX 7138 BRADENTON FL 34210	
2. Principal Place of Business 21 P.O. Box 530156 Suite, Apt. #, etc.		2a. Mailing Address 26 P.O. Box 530156 Suite, Apt. #, etc.	
22 City & State 23 St. Petersburg FL Zip Country		27 City & State 28 St. Petersburg FL Zip Country	
24 33747 25		29 33747 30	
9. Name and Address of Current Registered Agent <b>KULIK, WAYNE M</b> <b>8602 54TH AVE. WEST</b> <b>BRADENTON FL 34210</b>		10. Name and Address of New Registered Agent 81 Name <b>Charles W. Parsons</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>4451 13th Way N.E.</b> 83 84 City <b>St. Petersburg</b> <b>FL</b> 85 Zip Code <b>33703</b>	
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 <i>Charles W. Parsons</i> DATE <b>2-26-99</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>12. OFFICERS AND DIRECTORS</b> TITLE NAME STREET ADDRESS CITY-ST-ZIP 1. <i>Charles W. Parsons</i> 2. <i>John Rupe</i> 3. <i>Sam Deas</i> 4. <i>Rebecca</i> 5. <i>Rebecca</i> 6. <i>Rebecca</i> 7. <i>Rebecca</i> 8. <i>Rebecca</i> 9. <i>Rebecca</i> 10. <i>Rebecca</i> 11. <i>Rebecca</i> 12. <i>Rebecca</i> 13. <i>Rebecca</i> 14. <i>Rebecca</i> 15. <i>Rebecca</i> 16. <i>Rebecca</i> 17. <i>Rebecca</i> 18. <i>Rebecca</i> 19. <i>Rebecca</i> 20. <i>Rebecca</i> 21. <i>Rebecca</i> 22. <i>Rebecca</i> 23. <i>Rebecca</i> 24. <i>Rebecca</i> 25. <i>Rebecca</i> 26. <i>Rebecca</i> 27. <i>Rebecca</i> 28. <i>Rebecca</i> 29. <i>Rebecca</i> 30. <i>Rebecca</i> 31. <i>Rebecca</i> 32. <i>Rebecca</i> 33. <i>Rebecca</i> 34. <i>Rebecca</i> 35. <i>Rebecca</i> 36. <i>Rebecca</i> 37. <i>Rebecca</i> 38. <i>Rebecca</i> 39. <i>Rebecca</i> 40. <i>Rebecca</i> 41. <i>Rebecca</i> 42. <i>Rebecca</i> 43. <i>Rebecca</i> 44. <i>Rebecca</i> 45. <i>Rebecca</i> 46. <i>Rebecca</i> 47. <i>Rebecca</i> 48. <i>Rebecca</i> 49. <i>Rebecca</i> 50. <i>Rebecca</i> 51. <i>Rebecca</i> 52. <i>Rebecca</i> 53. <i>Rebecca</i> 54. <i>Rebecca</i> 55. <i>Rebecca</i> 56. <i>Rebecca</i> 57. <i>Rebecca</i> 58. <i>Rebecca</i> 59. <i>Rebecca</i> 60. <i>Rebecca</i> 61. <i>Rebecca</i> 62. <i>Rebecca</i> 63. <i>Rebecca</i> 64. <i>Rebecca</i> 65. <i>Rebecca</i> 66. <i>Rebecca</i> 67. <i>Rebecca</i> 68. <i>Rebecca</i> 69. <i>Rebecca</i> 70. <i>Rebecca</i> 71. <i>Rebecca</i> 72. <i>Rebecca</i> 73. <i>Rebecca</i> 74. <i>Rebecca</i> 75. <i>Rebecca</i> 76. <i>Rebecca</i> 77. <i>Rebecca</i> 78. <i>Rebecca</i> 79. <i>Rebecca</i> 80. <i>Rebecca</i> 81. <i>Rebecca</i> 82. <i>Rebecca</i> 83. <i>Rebecca</i> 84. <i>Rebecca</i> 85. <i>Rebecca</i> 86. <i>Rebecca</i> 87. <i>Rebecca</i> 88. <i>Rebecca</i> 89. <i>Rebecca</i> 90. <i>Rebecca</i> 91. <i>Rebecca</i> 92. <i>Rebecca</i> 93. <i>Rebecca</i> 94. <i>Rebecca</i> 95. <i>Rebecca</i> 96. <i>Rebecca</i> 97. <i>Rebecca</i> 98. <i>Rebecca</i> 99. <i>Rebecca</i> 100. <i>Rebecca</i>		<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b> 1.1 TITLE <b>D</b> <b>Commodore</b> 1.2 NAME <b>Charles W Parsons</b> 1.3 STREET ADDRESS <b>4451 13th Way N.E.</b> 1.4 CITY-ST-ZIP <b>St. Petersburg FL 33703</b> 2.1 TITLE <b>D</b> <b>Vice Commodore</b> 2.2 NAME <b>John Rupe</b> 2.3 STREET ADDRESS <b>12701 Dunhill Drive</b> 2.4 CITY-ST-ZIP <b>Tampa FL 33624</b> 3.1 TITLE <b>D</b> <b>Rebecca Commodore</b> 3.2 NAME <b>Sam Deas</b> 3.3 STREET ADDRESS <b>2801 Miriam St S.</b> 3.4 CITY-ST-ZIP <b>Gulfport FL 33711</b> 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	

14. I hereby certify that the information supplied with this filing 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Charles W. Parsons* Charles W Parsons 2-26-99 727-547-7670  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)