

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P17325 (2)
 1. Corporation Name
BASS COCOA BEACH, INC.

Principal Place of Business THREE RAVINIA DRIVE #2900 C/O CORPORATE TAX ATLANTA GA 30346-2149 US	Mailing Address THREE RAVINIA DRIVE #2900 C/O CORPORATE TAX ATLANTA GA 30346-2143 US
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3. Date Incorporated or Qualified 12/21/1987	3a. Date of Last Report 05/01/1996
4. FEI Number 58-1758359	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No WE HAVE FILED	

2. Principal Place of Business THREE RAVINIA DR, STE 2900 Suite, Apt. #, etc.	2a. Mailing Address THREE RAVINIA DR, STE 2900 Suite, Apt. #, etc.
22. C/O CORPORATE TAX City & State	27. C/O CORPORATE TAX City & State
23. ATLANTA GA Zip Country	28. ATLANTA GA Zip Country
24. 30346-2149 25. US	29. 30346-2149 30. US

9. Name and Address of Current Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	VS <input type="checkbox"/> DELETE
NAME	KACENA, JAMES L
STREET ADDRESS	THREE RAVINIA DR #2000
CITY-ST-ZIP	ATLANTA GA
TITLE	EVD <input checked="" type="checkbox"/> DELETE
NAME	STALEY, GRAHAM D
STREET ADDRESS	THREE RAVINIA DR #2000
CITY-ST-ZIP	ATLANTA GA
TITLE	VT <input checked="" type="checkbox"/> DELETE
NAME	SINYARD, DAVID B
STREET ADDRESS	THREE RAVINIA DRIVE #2000
CITY-ST-ZIP	ATLANTA GA 30346-2149
TITLE	V <input type="checkbox"/> DELETE
NAME	GOODSON, MICHAEL
STREET ADDRESS	THREE RAVINIA DR #2000
CITY-ST-ZIP	ATLANTA GA
TITLE	PD <input type="checkbox"/> DELETE
NAME	ROSENBERG, JAMES D.
STREET ADDRESS	THREE RAVINIA DRIVE #2900
CITY-ST-ZIP	ATLANTA GA
TITLE	V <input type="checkbox"/> DELETE
NAME	BRETTSCHNEIDER, THOMAS
STREET ADDRESS	THREE RAVINIA DR #2000
CITY-ST-ZIP	ATLANTA GA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	V/S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	KACENA, JAMES L.
1.3 STREET ADDRESS	THREE RAVINIA DR, STE 2900
1.4 CITY-ST-ZIP	ATLANTA GA 30346-2149
2.1 TITLE	DN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	REAVLEY, MARTIN J.
2.3 STREET ADDRESS	THREE RAVINIA DR, STE 2900
2.4 CITY-ST-ZIP	ATLANTA GA 30346-2149
3.1 TITLE	D/V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	PEACH, DAVID
3.3 STREET ADDRESS	THREE RAVINIA DR, STE 2900
3.4 CITY-ST-ZIP	ATLANTA GA 30346-2149
4.1 TITLE	V/T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	GOODSON, MICHAEL L.
4.3 STREET ADDRESS	THREE RAVINIA DR, STE 2900
4.4 CITY-ST-ZIP	ATLANTA GA 30346-2149
5.1 TITLE	P/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	ROSENBERG, JAMES D.
5.3 STREET ADDRESS	THREE RAVINIA DR, STE 2900
5.4 CITY-ST-ZIP	ATLANTA GA 30346-2149
6.1 TITLE	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	BRETTSCHNEIDER THOMAS
6.3 STREET ADDRESS	THREE RAVINIA DR, STE 2900
6.4 CITY-ST-ZIP	ATLANTA GA 30346-2149

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: M. L. Goodson **MICHAEL L. GOODSON** 4/14/97 (770) 604-2000
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Office Phone #

CR2E034 (9/96)

Directors and Officers
Bass Cocoa Beach, Inc.

04/07/1997

DIRECTORS:

David Peach
Martin J Reavley
James D Rosenberg

Director
Director
Director

OFFICERS:

Thomas H Brettschneider
Michael L Goodson

James L Kacena

David Peach
Elaine R. Pope
Martin J Reavley
James D Rosenberg

Vice President
Treasurer
Vice President
Vice President
Secretary
Vice President
Assistant Secretary
Vice President
President