


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P94000058038 (8)		
1. Corporation Name FUN RENTALS OF HOLLYWOOD BEACH, INC.		



Principal Place of Business 4818 CORONADO PARKWAY CAPE CORAL FL 33904 Hollywood Beach Oceanwalk Mall	Mailing Address 4818 CORONADO PARKWAY CAPE CORAL FL 33904
--	---

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 101 N. Ocean Drive Ste 135 23 City & State Hollywood FL 24 Zip 33019 25 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 08/05/1994 3a. Date of Last Report 04/03/1995 4. FEI Number 65-0511238 Applied For 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
--	---	---

9. Name and Address of Current Registered Agent BARAJAS, CINDY G 4818 CORONADO PARKWAY CAPE CORAL FL 33904	10. Name and Address of New Registered Agent 81 Name Jeannie Murphy 82 Street Address (P.O. Box Number is Not Acceptable) 4818 Coronado Pkwy. 83 Cape Coral 84 City FL 85 Zip Code 33904
--	--

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: Jeannie Murphy Jeannie Murphy DATE: _____

12. OFFICERS AND DIRECTORS <table border="1" style="width: 100%;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">PD</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> DELETE</td> <td style="width: 20%;"></td> </tr> <tr> <td>NAME</td> <td>LANKTREE, JOSEPH L.</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1250 ARCOLA DR</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>FT MYERS FL</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>TSD</td> <td style="text-align: center;"><input type="checkbox"/> DELETE</td> <td></td> </tr> <tr> <td>NAME</td> <td>COIL, HERSCHELL ROGE</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4818 CORONADO PKWY</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CAPE CORAL FL</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> DELETE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> DELETE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> DELETE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td></td> </tr> </table>	TITLE	PD	<input type="checkbox"/> DELETE		NAME	LANKTREE, JOSEPH L.			STREET ADDRESS	1250 ARCOLA DR			CITY-ST-ZIP	FT MYERS FL			TITLE	TSD	<input type="checkbox"/> DELETE		NAME	COIL, HERSCHELL ROGE			STREET ADDRESS	4818 CORONADO PKWY			CITY-ST-ZIP	CAPE CORAL FL			TITLE		<input type="checkbox"/> DELETE		NAME				STREET ADDRESS				CITY-ST-ZIP				TITLE		<input type="checkbox"/> DELETE		NAME				STREET ADDRESS				CITY-ST-ZIP				TITLE		<input type="checkbox"/> DELETE		NAME				STREET ADDRESS				CITY-ST-ZIP				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1" style="width: 100%;"> <tr> <td style="width: 10%;">11 TITLE</td> <td style="width: 60%;">Director</td> <td style="width: 10%; text-align: center;"><input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> <td style="width: 20%;"></td> </tr> <tr> <td>12 NAME</td> <td>Russ Whitney</td> <td></td> <td></td> </tr> <tr> <td>13 STREET ADDRESS</td> <td>4818 Coronado Pkwy</td> <td></td> <td></td> </tr> <tr> <td>14 CITY-ST-ZIP</td> <td>Cape Coral FL 33904</td> <td></td> <td></td> </tr> <tr> <td>21 TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td></td> </tr> <tr> <td>22 NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>23 STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>24 CITY-ST-ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>31 TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td></td> </tr> <tr> <td>32 NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>33 STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>34 CITY-ST-ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>41 TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td></td> </tr> <tr> <td>42 NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>43 STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>44 CITY-ST-ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>51 TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td></td> </tr> <tr> <td>52 NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>53 STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>54 CITY-ST-ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>61 TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td></td> </tr> <tr> <td>62 NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>63 STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>64 CITY-ST-ZIP</td> <td></td> <td></td> <td></td> </tr> </table>	11 TITLE	Director	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		12 NAME	Russ Whitney			13 STREET ADDRESS	4818 Coronado Pkwy			14 CITY-ST-ZIP	Cape Coral FL 33904			21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		22 NAME				23 STREET ADDRESS				24 CITY-ST-ZIP				31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		32 NAME				33 STREET ADDRESS				34 CITY-ST-ZIP				41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		42 NAME				43 STREET ADDRESS				44 CITY-ST-ZIP				51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		52 NAME				53 STREET ADDRESS				54 CITY-ST-ZIP				61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		62 NAME				63 STREET ADDRESS				64 CITY-ST-ZIP			
TITLE	PD	<input type="checkbox"/> DELETE																																																																																																																																																																															
NAME	LANKTREE, JOSEPH L.																																																																																																																																																																																
STREET ADDRESS	1250 ARCOLA DR																																																																																																																																																																																
CITY-ST-ZIP	FT MYERS FL																																																																																																																																																																																
TITLE	TSD	<input type="checkbox"/> DELETE																																																																																																																																																																															
NAME	COIL, HERSCHELL ROGE																																																																																																																																																																																
STREET ADDRESS	4818 CORONADO PKWY																																																																																																																																																																																
CITY-ST-ZIP	CAPE CORAL FL																																																																																																																																																																																
TITLE		<input type="checkbox"/> DELETE																																																																																																																																																																															
NAME																																																																																																																																																																																	
STREET ADDRESS																																																																																																																																																																																	
CITY-ST-ZIP																																																																																																																																																																																	
TITLE		<input type="checkbox"/> DELETE																																																																																																																																																																															
NAME																																																																																																																																																																																	
STREET ADDRESS																																																																																																																																																																																	
CITY-ST-ZIP																																																																																																																																																																																	
TITLE		<input type="checkbox"/> DELETE																																																																																																																																																																															
NAME																																																																																																																																																																																	
STREET ADDRESS																																																																																																																																																																																	
CITY-ST-ZIP																																																																																																																																																																																	
11 TITLE	Director	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition																																																																																																																																																																															
12 NAME	Russ Whitney																																																																																																																																																																																
13 STREET ADDRESS	4818 Coronado Pkwy																																																																																																																																																																																
14 CITY-ST-ZIP	Cape Coral FL 33904																																																																																																																																																																																
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																																																															
22 NAME																																																																																																																																																																																	
23 STREET ADDRESS																																																																																																																																																																																	
24 CITY-ST-ZIP																																																																																																																																																																																	
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																																																															
32 NAME																																																																																																																																																																																	
33 STREET ADDRESS																																																																																																																																																																																	
34 CITY-ST-ZIP																																																																																																																																																																																	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																																																															
42 NAME																																																																																																																																																																																	
43 STREET ADDRESS																																																																																																																																																																																	
44 CITY-ST-ZIP																																																																																																																																																																																	
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																																																															
52 NAME																																																																																																																																																																																	
53 STREET ADDRESS																																																																																																																																																																																	
54 CITY-ST-ZIP																																																																																																																																																																																	
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																																																															
62 NAME																																																																																																																																																																																	
63 STREET ADDRESS																																																																																																																																																																																	
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, in conjunction with an address.

SIGNATURE: [Signature] Director **4/30/96** DATE: _____

CR2E034 (12/95)