

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

FILED
Mar 14 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 # P95000019043 (5)

1. Corporation Name

FLORIDA GOLF & MARINA, INC.



Principal Place of Business

1931 SE 32 TERR
CAPE CORAL FL 33904

Mailing Address

6371-4 PRESIDENTIAL CT
FT MYERS FL 33919-3548
US

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 Suite, Apt. #, etc.		26 1420 SE 3RD ST.		03/06/1995		04/01/1996	
22 City & State		27 Suite, Apt. #, etc.		4. FEI Number		Applied For	
23 Zip		28 CAPE CORAL, FL		65-0632825		Not Applicable	
24 Country		29 33990		5. Certificate of Status Desired		8.75 Additional Fee Required	
25		30 LEE		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
26		31		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		Yes No	

9. Name and Address of Current Registered Agent

GUDRUN M. NICKEL, P.A.
350 FIFTH AVE S
SUITE 200
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name	HEIDE BLAIR
82 Street Address (P.O. Box Number is Not Acceptable)	1420 SE 3RD ST.
83	
84 City	CAPE CORAL FL
85 Zip Code	33990

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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 HEIDE BLAIR

Signature, typed or printed name of registered agent and the Approver

(NOTE: Registered Agent Signature required when reinstating)

DATE

2/20/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	
NAME	ERKER, DAGMAR	1.2 NAME	
STREET ADDRESS	1931 SE 32 TERRACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL 33904	1.4 CITY-ST-ZIP	
TITLE	VTD	2.1 TITLE	
NAME	ERKER, GUNTER	2.2 NAME	
STREET ADDRESS	1931 SE 32 TERRACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL 33904	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	S HEIDE BLAIR
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	1420 SE 3RD ST.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	CAPE CORAL, FL 33990
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: HEIDE BLAIR, Sec. Heide Blair 2/20/97 941-548-2444

CR2E034 (9/96)