

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000020288 (3)

1. Corporation Name

FLORIDA VILLA & BOAT SERVICE, INC.

Principal Place of Business

718 SW 49TH LANE
CAPE CORAL FL 33914

Mailing Address

718 SW 49TH LANE
CAPE CORAL FL 33914

97 SEP 18 PM 12:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/13/1995	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0570061	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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

6371-4 Presidential Ct.

Fort Myers Florida

33919

9. Name and Address of Current Registered Agent

NICKEL, GUDRUN M
350 FIFTH AVE. S. #200
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name Andrew G. Jessen
82 Street Address (P.O. Box Number is Not Acceptable)
6371-4 Presidential Ct.
83
84 City Fort Myers FL 85 Zip Code 33919

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 607.0506, Florida Statutes.

SIGNATURE Andrew G. Jessen

Andrew G. Jessen

9/9/97

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	FALTIN, WALTER	
STREET ADDRESS	718 SW 49TH LANE	
CITY-ST-ZIP	CAPE CORAL FL 33914	
TITLE	DST	<input type="checkbox"/> DELETE
NAME	FALTIN, BRIGITTE	
STREET ADDRESS	718 SW 49TH LANE	
CITY-ST-ZIP	CAPE CORAL FL 33914	
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

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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-09/23/97--01047--006
*****165.00 *****165.00

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 provided for on an attachment with an address.

SIGNATURE [Signature]

9/9/97

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CR2E034 (4/97)

Sigrid Litterer
2221 SW 43rd Lane,
Cape Coral, Fla. 33914

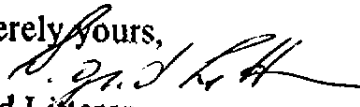
Division of Corporation,
Attn:- Annual Report
P.O.Box 6327
Tallahassee, 32314

Further to my telephone conversation with Mrs. Jane, I hereby enclose the second request for our annual report together with a cheque in the amount of \$165.--.

I regret, that the annual report for our corporation, namely Florida Villa & Boat Service, Inc., , Doc. No. P 95000020288 was not received thus the delay in filing.

I greatly appreciate your help in this matter and trust you will be able to accept completed report for above named corporation.

Sincerely yours,


Sigrid Litterer