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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P95000034213 (5) 1. Corporation Name SPINNAKER HOLDING COMPANY			

Principal Place of Business 18408 LOST LAKE WAY JUPITER, FL 33458	Mailing Address 18408 LOST LAKE WAY JUPITER FL 33458
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2. Principal Place of Business 21 1609 NW Boca Raton Blvd Suite, Apt. #, etc. 22 City & State Boca Raton, FL Zip 32314	2a. Mailing Address 26 1609 NW Boca Raton Blvd Suite, Apt. #, etc. 27 City & State Boca Raton, FL Zip 32314
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9. Name and Address of Current Registered Agent MCMULLEN, SCOTT L JONES, FOSTER, JOHNSTON 7 STUBBS, P.A. 505 S. FLAGLER DR., STE. 1100 WEST PALM BEACH FL 33402-3475	
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10. Name and Address of New Registered Agent 81 Name Thomas D. Cole 82 Street Address (P.O. Box Number is Not Acceptable) 140 Intracoastal Pointe Dr., #305 83 84 City Jupiter FL 85 Zip Code 33477	
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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 _____ DATE 11/12/99
(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D BRUNK, STEVEN G 18408 LOST LAKE WAY JUPITER FL 33458	1.1 TITLE	Change Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	1609 NW Boca Raton Blvd.
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Boca Raton, FL 33432
TITLE	D BRUNK, CARLENE M 18408 LOST LAKE WAY JUPITER FL 33458	2.1 TITLE	Change Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	1609 NW Boca Raton Blvd.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Boca Raton, FL 33432
TITLE		3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	600003070606--7
TITLE		4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ SIGNATURE REQUIRED _____ 561-392-8626
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SPINNAKER HOLDING COMPANY, INC.
1609 NW BOCA RATON BLVD.
BOCA RATON, FL 33432

November 12, 1999

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: 1999 Annual Report

Gentlemen:

Enclosed please find our corporate annual report for 1999. I apologize for our late filing, but I never received a reporting form from your office. Apparently, the report was mailed to an incorrect address.

I have enclosed a check in the amount of \$150 for the annual fee.

Once again, I apologize and appreciate your understanding.

Very truly yours,


Steve Brunk, President

Enclosures