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FILED  
Jun 04 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000077752 (9)

1. Corporation Name

AQUA SPORTS UNLIMITED FMB, INC.

Principal Place of Business

Mailing Address

6880 ESTERO BLVD.  
FT. MYERS BEACH FL 33901

P.O. BOX 32  
FT. MYERS BEACH FL 33901

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/16/1996

4. FEI Number 65-0801893

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

Yes No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PERRY, WILLIAM E  
5544-4 MALT DRIVE  
FT. MYERS FL 33907

81 Name

WILLIAM E PERRY

82 Street Address (P.O. Box Number is Not Acceptable)

5544-1 MALT DRIVE

83

84

City FT. MYERS

FL

85 Zip Code

33907

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

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

WILLIAM E PERRY PRESIDENT

1/15/98

DATE

12.

OFFICERS AND DIRECTORS

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

P  
PERRY, WILLIAM E  
5544-4 MALT DRIVE  
FT. MYERS BEACH FL 33907

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

V  
PERRY, LISA E  
5544-4 MALT DRIVE  
FT. MYERS BEACH FL 33907

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

PRESIDENT  
WILLIAM E PERRY  
5544-1 MALT DRIVE  
FT. MYERS FL 33907

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

VICE PRESIDENT  
LISA E PERRY  
5544-1 MALT DRIVE  
FT. MYERS FL 33907

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 typed or printed name of registered agent and title if applicable

WILLIAM E PERRY PRESIDENT

1/15/98

DATE

CR2E034 (10/97)