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May 05 1997 8:00am
Secretary of State



PROFIT CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # P96000102311 (3)

1. Corporation Name
GULF BAY WATER SPORTS, INC.
GULF BAY MARINE MANAGEMENT INC.



Principal Place of Business
179 S BAY DR
NAPLES FL 34108

Mailing Address
179 S BAY DR
NAPLES FL 34108-2306

3. Date Incorporated or Qualified
12/19/1996

3a. Date of Last Report

4. FEI Number
59-341-5220

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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

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9. Name and Address of Current Registered Agent
HARVEY, PAUL
179 S BAY DR
NAPLES FL 34108

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

85 Zip Code

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 _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME P MICHAEL H. GRACE

1.3 STREET ADDRESS 179 SOUTH BAY DR

1.4 CITY - ST - ZIP NAPLES, FL 34108

2.1 TITLE Change Addition

2.2 NAME V PAUL HARVEY

2.3 STREET ADDRESS 179 SOUTH BAY DR

2.4 CITY - ST - ZIP NAPLES, FL 34108

3.1 TITLE Change Addition

3.2 NAME ST MONICA HARVEY

3.3 STREET ADDRESS 179 SOUTH BAY DR

3.4 CITY - ST - ZIP NAPLES, FL 34108

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE Change Addition

6.2 NAME 500002169595

6.3 STREET ADDRESS -05/07/97--01059--077

6.4 CITY - ST - ZIP ***173.75

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: *Monica Harvey* MONICA HARVEY (941) 597-2063
Date: 4/23/97
Daytime Phone # 0006366

CR2E034 (9/96)