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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 765823

1. Corporation Name
ADVISORY COUNCIL ON UNDERWATER ARCHAEOLOGY, INC.

Principal Place of Business
1800 MARSTON PLACE
TALLAHASSEE FL 32312

Mailing Address
1800 MARSTON PLACE
TALLAHASSEE FL 32312



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
11/19/1982

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number
59-2373559

Applied For
Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FISCHER, GEORGE R.
1800 MARSTON PLACE
TALLAHASSEE FL 32312-0426

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME P
STREET ADDRESS CARRELL, TONI
CITY-ST-ZIP CORPUS CHRISTI MUSEUM
CORPUS CHRISTI TX

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE DELETE
NAME V
STREET ADDRESS GRENIER, ROBERT
CITY-ST-ZIP 1600 LIVERPOOL COURT
OTTAWA, ONT., CANADA

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DELETE
NAME S
STREET ADDRESS STRIGHT, MELANIE
CITY-ST-ZIP MINERALS MANAGEMENT-SER
MERRIDON VA

3.1 TITLE Change Addition
3.2 NAME Robyn Woodward
3.3 STREET ADDRESS Vancouver Maritime Museum
3.4 CITY-ST-ZIP Vancouver, British Columbia, CANADA

TITLE DELETE
NAME T
STREET ADDRESS FISCHER, GEORGE R
CITY-ST-ZIP FLORIDA STATE UNIVERSITY
TALLAHASSEE FL

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME D
STREET ADDRESS JOHNSON, PAUL F
CITY-ST-ZIP NATL. MUSEUM OF AMER HIS
WASHINGTON DC

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME D
STREET ADDRESS SEIPERT, BETTY L
CITY-ST-ZIP JEFFERSON PATTERSON PK
ST LEONARD MD

6.1 TITLE Change Addition
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

George R. Fischer

4/28/99

850-385-0903

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/198)