

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 766718

FILED
Aug 12, 2002
Secretary of State

Entity Name: UNITED STATES PROFESSIONAL DIVING COACHES ASSOCIATION, INC.

Current Principal Place of Business:

C/O KEITH RUSSELL
3242 APACHE LN
PROVO, UT 84604

New Principal Place of Business:

Current Mailing Address:

C/O KEITH RUSSELL
3242 APACHE LN
PROVO, UT 84604

New Mailing Address:

FEI Number: 58-1801343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURGERING, DAVID
5100 CORONADO RIDGE
BOCA RATON, FL 33086 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RUSSELL, KEITH
Address: 3242 APACHE LN
City-St-Zip: PROVO, UT 84604

Title: VPD () Delete
Name: HOCKING, JAMES
Address: 2509 B ST
City-St-Zip: LINCOLN, NB 68502

Title: VPJD () Delete
Name: SIXBURY, KARA
Address: 81 BONNYWINE
City-St-Zip: WILLIAMSVILLE, NY 14221

Title: TD () Delete
Name: VOELLMECKE, STEVE,
Address: 7833 STYRAX LANE
City-St-Zip: CINCINNATI, OH 45236

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: VOELLMECKE, STEVE,
Address: 6365 DERBYSHIRE LANE
City-St-Zip: LOVELAND, OH 45140

Title: SECY () Change (X) Addition
Name: BEAVERS, DOUG
Address: 94 BREEZY KNOLL LANE
City-St-Zip: LAKE ST. LOUIS, MO 63367

Title: MBR () Change (X) Addition
Name: VOELLMECKE, STEVE
Address: 6365 DERBYSHIRE LANE
City-St-Zip: LOVELAND, OH 45140

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN F. VOELLMECKE

TRES

08/12/2002

Electronic Signature of Signing Officer or Director

_____ Date