

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004870

FILED
Mar 23, 2011
Secretary of State

Entity Name: THE FLORIDA KEYS HISTORY OF DIVING MUSEUM, INC.

Current Principal Place of Business:

82990 OVERSEAS HWY
ISLAMORADA, FL 33036

New Principal Place of Business:

Current Mailing Address:

82990 OVERSEAS HWY
ISLAMORADA, FL 33036

New Mailing Address:

FEI Number: 65-1037158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUER, SALLY E
75995 OVERSEAS HWY.
ISLAMORADA, FL 33036 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: PRES
Name: BAUER, SALLY E DR.
Address: 75995 OVERSEAS HWY.
City-St-Zip: ISLAMORADA, FL 33036 US

Title: DIR
Name: DEHAAS, DAVID MR.
Address: 88975 OVERSEAS HIGHWAY
City-St-Zip: TAVERNIER, FL 33070 US

Title: DIR
Name: MISO, KRISTIN A MRS.
Address: 2302 WROXTON ROAD
City-St-Zip: HOUSTON, TX 77005 US

Title: DIR
Name: GROSS, PATTI MRS.
Address: 140 STROMBOLI STREET
City-St-Zip: ISLAMORADA, FL 33036 US

Title: DIR
Name: DRAVES, BARB P MRS.
Address: 580 MILES LANE
City-St-Zip: BEREAS, OH 44017 US

Title: DIR
Name: HAZELBAKER, JON MR.
Address: 11520 ISLE OF PALMS DRIVE
City-St-Zip: FT. MYERS BEACH, FL 33931

I hereby 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 all other like empowered.

SIGNATURE: SALLY E. BAUER

PRES

03/23/2011

Electronic Signature of Signing Officer or Director

Date