

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008614

FILED
Mar 13, 2007
Secretary of State

Entity Name: TREASURE COAST AQUATICS & DIVING, INC.

Current Principal Place of Business:

1909 S.W. WINNERS DRIVE
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

1909 S.W. WINNERS DRIVE
PALM CITY, FL 34990

New Mailing Address:

FEI Number: 56-2312685

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TONER, DARLA
1909 S.W. WINNERS DRIVE
PALM CITY, FL 34990 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: D () Delete
Name: MARK, ROBERT
Address: 2025 N.E. RIVER COURT
City-St-Zip: JENSEN BEACH, FL 34956

Title: D () Delete
Name: SANGUILY, ALICIA
Address: 4224 SW RIVERS END WAY
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: SNOW, GLEN
Address: 3112 SW SEABOARD AVE
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS. (X) Change () Addition
Name: GOODMAN, MYRNA R
Address: 2762 SW MATHESON AVE APT A111
City-St-Zip: PALM CITY, FL 34990 US

Title: MRS. (X) Change () Addition
Name: ROSS, NANCY
Address: 1706 PONDBERRY LANE
City-St-Zip: PT ST LUCIE, FL 34952 US

Title: MRS. (X) Change () Addition
Name: FILIPPONI, JEANNE
Address: 5994 SE ORANGE BLOSSOM TR
City-St-Zip: HOBE SOUND, FL 33455 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MYRNA GOODMAN

MRS.

03/13/2007

Electronic Signature of Signing Officer or Director

Date