FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N04164 (2)

1. Corporation Name

CAVE DIVING SECTION OF THE NATIONAL SPELEOLOGICA L SOCIETY, INC.

Principal Place of Business	Mailing Address
P O BOX 950 BRANFORD FL 32008-7950	P O BOX 950 BRANFORD FL 32008-7950

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt #, etc 22	Suite, Apt #, etc 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/13/1984
3a. Date of Last Report: 02/24/1994
4. FEI Number: 59-2437883 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

TASSO, ERIC P
3535 NW 54TH LANE
GAINESVILLE FL 32606

10. Name and Address of New Registered Agent

81 Name: TASSO ERIC P.
82 Street Address (P.O. Box Number is Not Acceptable): 4929 NW 71ST PLACE
83
84 City: GAINESVILLE FL 85 Zip Code: 32653

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 E P Tasso 2/6/95
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	TD	11 TITLE	☒ Change ☐ Addition
NAME	TASSO, ERIC P	12 NAME	DELETE
STREET ADDRESS	3535 NW 54TH LANE	13 STREET ADDRESS	
CITY ST ZIP	GAINESVILLE FL 32606	14 CITY ST ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	HIRES, LAMAR	22 NAME	
STREET ADDRESS	RT 14 BOX 162	23 STREET ADDRESS	
CITY ST ZIP	LAKE CITY FL 32055	24 CITY ST ZIP	
TITLE	SD	31 TITLE	☐ Change ☐ Addition
NAME	BROOME, GENE	32 NAME	
STREET ADDRESS	406 PLANT STREET	33 STREET ADDRESS	
CITY ST ZIP	BRANFORD FL	34 CITY ST ZIP	
TITLE	CD	41 TITLE	☐ Change ☐ Addition
NAME	ODOM, JOE	42 NAME	
STREET ADDRESS	452 AIRPORT RD., S.W.	43 STREET ADDRESS	
CITY ST ZIP	HARTSELLE AL	44 CITY ST ZIP	
TITLE		51 TITLE	TD ☐ Change ☒ Addition
NAME		52 NAME	A. RICK WOLFE
STREET ADDRESS		53 STREET ADDRESS	3350 PLEASANT HILL Rd Apt 1019
CITY ST ZIP		54 CITY ST ZIP	DULUTH GA 30136
TITLE		61 TITLE	V/D ☐ Change ☒ Addition
NAME		62 NAME	J. WATSON BOZLEY
STREET ADDRESS		63 STREET ADDRESS	90 KAREN CAMILLE
CITY ST ZIP		64 CITY ST ZIP	LAWRENCEVILLE FL.

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: A. Rick Wolfe (TREAS) 4/27/95 (904) 376-8246 EXT 234
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0021786