

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 19 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # NO4164 (2)
1. Corporation Name
CAVE DIVING SECTION OF THE NATIONAL SPELEOLOGICAL SOCIETY, INC.

Principal Place of Business P O BOX 950 BRANFORD FL 32008-7950	Mailing Address P O BOX 950 BRANFORD FL 32008-7950
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 07/13/1984
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. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

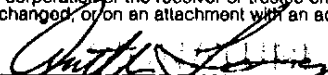
9. Name and Address of Current Registered Agent BREWER, DAVID G 1420 SOUTH FIRST STREET LAKE CITY FL 32025	10. Name and Address of New Registered Agent 81 Name ANNETTE M. LONG 82 Street Address (P.O. Box Number is Not Acceptable) 01363 SPRING LAKE ROAD 83 84 City FRUITLAND PARK, FL 85 Zip Code 34731
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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  1/28/98
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD ☒ DELETE	1.1 TITLE	C/D ☐ Change ☒ Addition
NAME	HIRES, LAMAR	1.2 NAME	JOHN ZUMRICK
STREET ADDRESS	RT 14 BOX 162	1.3 STREET ADDRESS	1588 CHAIN FERN WAY
CITY-ST-ZIP	LAKE CITY FL 32055	1.4 CITY-ST-ZIP	ORANGE PARK, FL 32073
TITLE	TSD ☐ DELETE	2.1 TITLE	V/D ☐ Change ☒ Addition
NAME	LONG, ANNETTE	2.2 NAME	WILLIAM RENNAKER
STREET ADDRESS	01363 SPRING LAKE RD	2.3 STREET ADDRESS	20338 180th TERRACE
CITY-ST-ZIP	FRUITLAND PARK FL 34731	2.4 CITY-ST-ZIP	LIVE OAK, FL 32060
TITLE	D ☐ DELETE	3.1 TITLE	D ☐ Change ☒ Addition
NAME	BUTT, PETE	3.2 NAME	JASON RICHARDS
STREET ADDRESS	P.O. BOX 1057 N/A	3.3 STREET ADDRESS	4117 SW 20TH TERRACE #202
CITY-ST-ZIP	HIGH SPRINGS FL 32655	3.4 CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	D ☒ DELETE	4.1 TITLE	D ☐ Change ☒ Addition
NAME	JABLONSKI, JARROD	4.2 NAME	MARK STEINGART
STREET ADDRESS	7607 NW 29TH PL	4.3 STREET ADDRESS	13634 EASY STREET
CITY-ST-ZIP	GAINESVILLE FL 32606	4.4 CITY-ST-ZIP	HUDSON, FL 34669
TITLE	D ☒ DELETE	5.1 TITLE	D ☐ Change ☒ Addition
NAME	DITTNER, STEVE	5.2 NAME	PAT WATSON
STREET ADDRESS	492 HOLBROOK CIR	5.3 STREET ADDRESS	P.O. BOX 210571 N/A
CITY-ST-ZIP	LAKE MARY FL 32746	5.4 CITY-ST-ZIP	MONTGOMERY, AL 36121
TITLE	D ☒ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	LANDON, SCOTT J	6.2 NAME	
STREET ADDRESS	6980 SALIDA LANE	6.3 STREET ADDRESS	
CITY-ST-ZIP	BEAUMONT TX	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.

SIGNATURE:  **REQUIRED**

1/28/98 (352) 326-4704

CP2E037 (10/97)