2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2006
Secretary of State

DOCUMENT# N04164

Entity Name: CAVE DIVING SECTION OF THE NATIONAL SPELEOLOGICAL SOCIETY, INC.

Current Principal Place of Business:

2109 W US 90
SUITE 170-317
LAKE CITY, FL 32055 US

New Principal Place of Business:

Current Mailing Address:

2109 W. US HWY 90
SUITE 170-317
LAKE CITY, FL 32055 US

New Mailing Address:

FEI Number: 59-2437883 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CHALKLEY, J W
1130 SE 17TH STREET
OCALA, FL 34471 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: C ( ) Delete
Name: MELTON, III, AUBREY E
Address: 6920 CYPRESS LAKE CT
City-St-Zip: ST AUGUSTINE, FL 32086

Title: T ( ) Delete
Name: ROTELLA, WILLIAM
Address: 2268 MAGNOLIA DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D ( ) Delete
Name: JESSOP, KELLY
Address: 1019 HAROLD AVENUE
City-St-Zip: AMERICUS, GA 31709

Title: D ( ) Delete
Name: DIPANFILO, RALPH
Address: 3280 NE STATE ROAD 47
City-St-Zip: HIGH SPRINGS, FL 32655

Title: S ( ) Delete
Name: BLACKBURN, RICHARD
Address: 3138 DUNN ST
City-St-Zip: SMYRNA, GA 30080

Title: VC ( ) Delete
Name: WILSON, FORREST
Address: 2832 CONCORD DRIVE
City-St-Zip: DECATUR, GA 30033

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

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

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

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: AUBREY E. MELTON III C 07/26/2006

Electronic Signature of Signing Officer or Director — Date