

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N37080

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: NATIONAL ACADEMY OF POLICE DIVING, INC. (NAPD)

Current Principal Place of Business:

6500 PRADO BLVD
CORAL GABLES, FL 33143 US

New Principal Place of Business:

Current Mailing Address:

1234 S. DIXIE HWY
#160
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 65-0177556 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAST, MICHAEL W
90 NW 189TH STREET
MIAMI, FL 33169 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: PD () Delete
Name: GAST, MICHAEL W
Address: 90 NW 189 ST
City-St-Zip: MIAMI, FL 33169

Title: VD () Delete
Name: MOXLEY, DONALD
Address: 4300 SHERIDAN STREET., #232
City-St-Zip: HOLLYWOOD, FL 33024

Title: SD () Delete
Name: HOFF, RANDY
Address: 6500 PRADO BLVD
City-St-Zip: CORAL GABLES, FL 33143

Title: TD () Delete
Name: HOLLAND, KEVIN C
Address: 16940 SW 119TH AVE
City-St-Zip: MIAMI, FL 33177

Title: D () Delete
Name: TOY, PAUL G
Address: 12121 SW 100TH STREET
City-St-Zip: MIAMI, FL 33186

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RANDY HOFF

S

05/01/2002

Electronic Signature of Signing Officer or Director

_____ Date