

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766718

FILED
Mar 12, 2007
Secretary of State

Entity Name: UNITED STATES PROFESSIONAL DIVING COACHES ASSOCIATION, INC.

Current Principal Place of Business:

C/O STEVE VOELLMECKE
6365 DERBYSHIRE LN
LOVELAND, OH 45140

New Principal Place of Business:

Current Mailing Address:

C/O STEVE VOELLMECKE
6365 DERBYSHIRE LN
LOVELAND, OH 45140

New Mailing Address:

C/O STEVE VOELLMECKE
P.O. BOX 268
MILFORD, OH 45150

FEI Number: 58-1801343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURGERING, DAVID
5100 CORONADO RIDGE
BOCA RATON, FL 33086 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: P () Delete
Name: WILSON, CURT
Address: 3823 CALLE TIBURON
City-St-Zip: SAN CLEMENTE, CA 92672 US

Title: VPD () Delete
Name: PARRINGTON, DAVE
Address: 8604 CONSTANCE WAY
City-St-Zip: KNOXVILLE, TN 37923 US

Title: VPJD () Delete
Name: SMITH, KARA
Address: 7430 WARWICK DRIVE
City-St-Zip: YPSILANTI, MI 48197 US

Title: TD () Delete
Name: VOELLMECKE, STEVE,
Address: 6365 DERBYSHIRE LANE
City-St-Zip: LOVELAND, OH 45140

Title: SECY () Delete
Name: CANO, PENNY
Address: 9758 PATIO COURT
City-St-Zip: BATON ROUGE, LA 70815

Title: MBR () Delete
Name: VOELLMECKE, STEVE
Address: 6365 DERBYSHIRE LANE
City-St-Zip: LOVELAND, OH 45140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WILSON, CURT
Address: 3823 CALLE TIBURON
City-St-Zip: SAN CLEMENTE, CA 92672 US

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

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

Title: TD (X) Change () Addition
Name: VOELLMECKE, STEVE,
Address: P.O. BOX 268
City-St-Zip: MILFORD, OH 45150

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

Title: MBR (X) Change () Addition
Name: VOELLMECKE, STEVE
Address: P.O. BOX 268
City-St-Zip: MILFORD, OH 45150

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: STEPHEN F. VOELLMECKE

TRES

03/12/2007

Electronic Signature of Signing Officer or Director

_____ Date