

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766718

FILED
Apr 22, 2008
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
P.O. BOX 268
MILFORD, OH 45150

New Mailing Address:

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: PRES () 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: P.O. BOX 268
City-St-Zip: MILFORD, OH 45150

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

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

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 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: STEVE VOELLMECKE

TD

04/22/2008

Electronic Signature of Signing Officer or Director

Date