

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766718

FILED  
Mar 05, 2009  
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

03/05/2009

Electronic Signature of Signing Officer or Director

Date