## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 761845** 

Entity Name: ACTIVE DIVERS ASSOCIATION, INC.

**Current Principal Place of Business:** 

13374 SW. 46 TERR. MIAMI, FL 33175

**Current Mailing Address:** 

13374 SW. 46 TERR. MIAMI, FL 33175 US

FEI Number: 81-2855633 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VON LINTEL, LONNIE LEO 13374 SW. 46 TERR MIAMI, FL 33175 US

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: LONNIE LEO VON LINTEL 04/18/2022

Electronic Signature of Registered Agent

Date

FILED Apr 18, 2022

**Secretary of State** 

5852427620CC

Officer/Director Detail:

Title PD Title SD

NameVON LINTEL, LONNIE LEONameCROWTHER, CONNIEAddress13374 SW. 46 TERRAddress3612 PALMARITO STREETCity-State-Zip:MIAMI FL 33175-3930City-State-Zip:CORAL GABLES FL 33134

Title TD Title VP

Name SMITH, MAURICIO JOSE Name WOOD, LEE

Address P.O.BOX 163303 Address 182 PLANTATION AVENUE
City-State-Zip: MIAMI FL 33116 City-State-Zip: TAVERNIER FL 33070

TitleDIRECTORTitleDIRECTORNameDAVIS, RACHELNameDAVIS, JOHN

Address 5087 OAK HILL LANE, #322 Address 5087 OAK HILL LANE, #322

City-State-Zip: DELRAY FL 33484 City-State-Zip: DELRAY FL 33484

Title DIRECTOR Title DIRECTOR

Name BAEZA, DANIEL Name JOHNSON, DARYL

Address 7592 PARKVIEW WAY Address 1100 S.E. 5TH COURT, #61
City-State-Zip: CORAL SPRINGS FL 33065 City-State-Zip: POMPANO BEACH FL 33060

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: CONNIE CROWTHER SECRETARY

Electronic Signature of Signing Officer/Director Detail

04/18/2022 Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name LAUREANO, AMBER Name BACH, JULIANA

Address 502 SW 4TH AVENUT Address 1218 DREXEL AVENUE

City-State-Zip: FT. LAUDERDALE FL 33315 City-State-Zip: MIAMI BEACH FL 33139