


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

May 01, 2006 08:00 A
Secretary of State

DOCUMENT # 703329 1. Entity Name BARNACLE BUSTERS DIVER INCORPORATED, OF GAINESVILLE, ALACHUA COUNTY FLORIDA	
--	---

Principal Place of Business % STABLER 710 SE COUNTY RD 234 GAINESVILLE, FL 32641-1304 US	Mailing Address % STABLER 710 SE COUNTY RD 234 GAINESVILLE, FL 32641-1304 US
--	--



04262006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 23-7287073	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent STABLER, L. J., JR. 710 SE COUNTY RD 234 GAINESVILLE, FL 32641-1304

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDV FINLEY, M CLAUDETTE 325 NW 48TH BLVD GAINESVILLE, FL 32607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RYSCHKEWITSCH, GEORGE 10 SW 41ST STREET GAINESVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STABLER, L J JR 710 SE COUNTY RD 234 GAINESVILLE, FL 326411304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VERMILLION, DAN 16337 NW 118TH PLACE ALACHUA, FL 32615
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRISHAM, DIANNE 16337 NW 118TH PLACE ALACHUA, FL 32615
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

UD00000549384
05/13/06-80018-010 70.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAURENCE J STABLER JR 4/24/06 352-376-7565
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #