

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703329

FILED  
Apr 11, 2009  
Secretary of State

**Entity Name:** BARNACLE BUSTERS DIVER INCORPORATED, OF GAINESVILLE, ALACHUA COUNTY FLORIDA

**Current Principal Place of Business:**

% STABLER  
710 SE COUNTY RD 234  
GAINESVILLE, FL 326411304 US

**New Principal Place of Business:**

**Current Mailing Address:**

% STABLER  
710 SE COUNTY RD 234  
GAINESVILLE, FL 326411304 US

**New Mailing Address:**

**FEI Number:** 23-7287073

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STABLER, L. J JR  
710 SE COUNTY RD 234  
GAINESVILLE, FL 326411304 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: PDV ( ) Delete  
Name: FINLEY, M CLAUDETTE  
Address: 325 NW 48TH BLVD  
City-St-Zip: GAINESVILLE, FL 32607

Title: SD ( ) Delete  
Name: RYSCHKEWITSCH, GEORGE  
Address: 10 SW 41ST STREET  
City-St-Zip: GAINESVILLE, FL 32607

Title: TD ( ) Delete  
Name: STABLER, L J JR  
Address: 710 SE COUNTY RD 234  
City-St-Zip: GAINESVILLE, FL 326411304

Title: D ( ) Delete  
Name: VERMILLION, DAN  
Address: 16337 NW 118TH PLACE  
City-St-Zip: ALACHUA, FL 32615

Title: D ( ) Delete  
Name: GRISHAM, DIANNE  
Address: 16337 NW 118TH PLACE  
City-St-Zip: ALACHUA, FL 32615

**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:

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: L. J. STABLER, JR.

TREA

04/11/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date