

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730311

FILED
Feb 01, 2009
Secretary of State

Entity Name: SOUTH FLORIDA DIVERS INC., SCUBA CLUB

Current Principal Place of Business:

1042 FAIRFAX LANE
WESTON, FL 33326 US

New Principal Place of Business:

Current Mailing Address:

1042 FAIRFAX LANE
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 23-7379620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNZIKER, KIM F T
1042 FAIRFAX LANE
WESTON, FL 33326 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: T () Delete
Name: HUNZIKER, KIM F
Address: 1042 FAIRFAX LANE
City-St-Zip: WESTON, FL 33326

Title: S () Delete
Name: EADES, DONNA
Address: 4711 SW 25TH TERR
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D () Delete
Name: KANSMAN, JOHN
Address: 1460 S.W. 21ST TERR.
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: P () Delete
Name: STEPHINSON, PETER J
Address: 18768 CAPE SABLE DR
City-St-Zip: BOCA RATON, FL 33498

Title: VP () Delete
Name: SMARIGA, JOSEPH
Address: 4412 SW 37TH AVE
City-St-Zip: FORT LAUDERDALE, FL 333125402

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: HUNZIKER, KIM F
Address: 1042 FAIRFAX LANE
City-St-Zip: WESTON, FL 33326

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
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Name:
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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: KIM HUNZIKER

T

02/01/2009

Electronic Signature of Signing Officer or Director

Date