2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2005
Secretary of State

DOCUMENT# 741615

Entity Name: PANAMA CITY DIVE CLUB, INC.

Current Principal Place of Business:

P.O. BOX 4636
PANAMA CITY, FL 32401 US

New Principal Place of Business:

P.O. BOX 35146
PANAMA CITY, FL 32412 US

Current Mailing Address:

P.O. BOX 4636
PANAMA CITY, FL 32401 US

New Mailing Address:

P.O. BOX 35146
PANAMA CITY, FL 32412 US

FEI Number: 59-2250006 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STONE, CHUCK T
329 NORTH COMET AVENUE
PANAMA CITY, FL 32404 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: STONE, CHUCK T
Address: 329 NORTH COMET AVENUE
City-St-Zip: PANAMA CITY, FL 32404 US

Title: VP ( ) Delete
Name: TURNER, BOB
Address: 1621 HOPE CIRCLE
City-St-Zip: PANAMA CITY BEACH, FL 32407 US

Title: SEC ( ) Delete
Name: FYFFE, ULRIKA
Address: 189 TREASURE PALM DR
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

Title: TREA (X) Delete
Name: LUZNY, DEBORAH J
Address: 6708 CHIPEWA STREET
City-St-Zip: PANAMA CITY, FL 32404 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: GIBBS, BARRY
Address: 316 PALM DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

Title: TREA (X) Change ( ) Addition
Name: PURER, PHYLLIS
Address: 306 VIRIGINIA AVE.
City-St-Zip: LYNN HAVEN, FL 32444 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PHYLLIS PURER TREA 04/16/2005

Electronic Signature of Signing Officer or Director — Date