

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765628

FILED
Feb 20, 2008
Secretary of State

Entity Name: CENTRAL FLORIDA PLEASURE DIVERS, INC.

Current Principal Place of Business:

108 WISTERIA DRIVE
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 53689
ORLANDO, FL 32853 US

New Mailing Address:

P O BOX 536891
ORLANDO, FL 32853 US

FEI Number: 59-2452485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANGSTON, ED
500 E HWY 436
SUITE 16
CASSELBERRY, FL 32707 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: D () Delete
Name: ZOECKLEIN, DON
Address: 4422 FOX HOLLOW CIR
City-St-Zip: CASSELBERRY, FL 32707

Title: PD () Delete
Name: MURNO, RANDY
Address: 1022 TURKEY HOLLOW CIR
City-St-Zip: WINTER PARK, FL 32708

Title: TD () Delete
Name: HEINMAN, JOAN
Address: 108 WISTERIA DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: VD () Delete
Name: RICKET, DARRYL
Address: 1882 CARALEE BLVD #2
City-St-Zip: ORLANDO, FL 32822

Title: SD () Delete
Name: BEYER, ELKE
Address: 9308 SANDYWOOD DRIVE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MUNRO, RANDY
Address: 1022 TURKEY HOLLOW CR.
City-St-Zip: WINTER SPRINGS, FL 32708

Title: PD (X) Change () Addition
Name: CARPENTER, LEE
Address: 441 HILLSDALE COURT
City-St-Zip: LAKE MARY, FL 32746

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

Title: VD (X) Change () Addition
Name: FRASER, RON
Address: 210 S SCOTT AVENUE
City-St-Zip: SANFORD, FL 32771

Title: SD (X) Change () Addition
Name: BERRY, LANI
Address: 441 HILLSDALE COURT
City-St-Zip: LAKE MARY, FL 32746

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: JOAN HEINMAN

TD

02/20/2008

Electronic Signature of Signing Officer or Director

Date