

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K72024** (8)

1. Corporation Name

SCUBA VENTURES, INC.



Principal Place of Business

**RT 2 BOX 393
TALLAHASSEE FL 32311
US**

Mailing Address

**ROUTE 2 BOX 393
TALLAHASSEE FL 32311
US**

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

26

State, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

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Zip

Country

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g. Name and Address of Current Registered Agent

**VANCE, JAMES M.
ROUTE 2 BOX 393
TALLAHASSEE FL 32311**

3. Date Incorporated or Quoted

03/10/1989

3a. Date of Last Report

04/06/1995

4. FEI Number

59-2935441

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Agent or Director Required for Change of Office, Agent, or Director)

(Signature of Registered Agent Required When Changing)

DATE

12. OFFICERS AND DIRECTORS

12.1

**DST
VANCE, JAMES M.
RT. 2, BOX 393
TALLAHASSEE FL
D**

☐ DELETE

12.2

**LAIDLAW, ROBERT E.
1900 HIDDEN VALLEY
TALLAHASSEE FL**

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1

13.1 NAME

☐ Change ☐ Addition

13.2

13.2 NAME

☐ Change ☐ Addition

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13.3 STREET ADDRESS

☐ Change ☐ Addition

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13.4 CITY, ST, ZIP

☐ Change ☐ Addition

13.5

13.5 NAME

☐ Change ☐ Addition

13.6

13.6 NAME

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13.7 STREET ADDRESS

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13.8 CITY, ST, ZIP

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13.9 NAME

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13.10 NAME

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13.11 STREET ADDRESS

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13.12 CITY, ST, ZIP

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13.14 NAME

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13.15 STREET ADDRESS

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13.16 CITY, ST, ZIP

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13.17 NAME

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13.18 NAME

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13.19 STREET ADDRESS

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13.20 CITY, ST, ZIP

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13.23 STREET ADDRESS

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13.24 CITY, ST, ZIP

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13.26 NAME

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13.27 STREET ADDRESS

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13.28 CITY, ST, ZIP

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13.29 NAME

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13.30 NAME

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13.31 STREET ADDRESS

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13.32 CITY, ST, ZIP

☐ Change ☐ Addition

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13.33 NAME

☐ Change ☐ Addition

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13.34 NAME

☐ Change ☐ Addition

SIGNATURE:

James M. Vance

JAMES M. VANCE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/96

(904) 997-5223

DATE

PHONE NUMBER

CR2E034 (12/95)