

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90020 027 *****50.00

DOCUMENT # L00000002086

1. Entity Name

DIVER DOWN, LLC.

Principal Place of Business

**9129 16TH AVENUE CIRCLE NW
 BRADENTON FL 34209**

Mailing Address

**9129 16TH AVENUE CIRCLE NW
 BRADENTON FL 34209**

2. Principal Place of Business

626 137TH ST. N.E.

3. Mailing Address

626 137TH ST. N.E.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BRADENTON FL

City & State

BRADENTON FL

Zip

34212

Country

MANATEE

Zip

34212

Country

MANATEE

4. FEI Number

65-0991848

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**LEHMAN, TIMOTHY P
 9129 16TH AVE CIRCLE NW
 BRADENTON FL 34209**

7. Name and Address of New Registered Agent

Name **JOHN BARTON MCGREGOR**

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

626 137TH ST. N.E.

City **BRADENTON**

FL

Zip Code **34212**

8. 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

TIMOTHY P. LEHMAN, MGR

4/8/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00
 Make Check Payable to Department of State
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☒ Delete
 NAME **LEHMAN, TIMOTHY P**
 STREET ADDRESS **9129 16TH AVE CIR NW**
 CITY-ST-ZIP **BRADENTON FL**

TITLE **MGR** ☐ Delete
 NAME **OGLES, MARK R**
 STREET ADDRESS **504 137TH ST E.**
 CITY-ST-ZIP **BRADENTON FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGR** ☐ Change ☒ Addition
 NAME **JOHN BARTON MCGREGOR**
 STREET ADDRESS **626 137TH ST. N.E.**
 CITY-ST-ZIP **BRADENTON, FL. 34212**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TIMOTHY P. LEHMAN

4/8/02

941-737-7448

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)