2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005115

FILED Mar 25, 2008 Secretary of State

Entity Name: KARST UNDERWATER RESEARCH, INC. **Current Principal Place of Business: New Principal Place of Business:** 16002 BETHANY PLACE TAMPA, FL 33647 **Current Mailing Address: New Mailing Address:** 16002 BETHANY PLACE TAMPA, FL 33647 FEI Number: 20-0935035 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PETERSEN, JEFF 16002 BETHANY PLACE TAMPA, FL 33647 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PETERSEN, JEFF J PT Name: Name: Address: 16002 BETHANY PLACE Address: City-St-Zip: TAMPA, FL 33647 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: MINER, DAVID D Name: Address: 412 36TH STREET NE Address: City-St-Zip: BRADENTON, FL 34208 US City-St-Zip: Title: () Delete Title: (X) Change () Addition STEVEN, STRAATSMA D Name: WALTER, PICKEL D Name: 350 PINELLAS BAY WAY #3 10116 LAKEWOOD RANCH DRIVE Address: Address: City-St-Zip: TIERRA VERDA, FL 33715 US City-St-Zip: RIVERVIEW, FL 33578 US Title: () Delete Title: (X) Change () Addition Name: HEMPHILL, BRETT D Name: HEMPHILL, BRETT D 37248 ORANGE BLOSSOM LANE Address: 39011 WOODLAND DR Address: City-St-Zip: ZEPHYRHILLS, FL 33542 City-St-Zip: DADE CITY, FL 33525

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: JEFF PETERSEN PT 03/25/2008