2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007
Secretary of State

DOCUMENT# N05000011977

Entity Name: UPPER KEYS ASSOCIATION OF DIVE AND SNORKEL OPERATORS, INC.

Current Principal Place of Business:

P.O. BOX 361
TAVERNIER, FL 33070

New Principal Place of Business:

90800 OVERSEAS HIGHWAY #9
TAVERNIER, FL 33070

Current Mailing Address:

P.O. BOX 361
TAVERNIER, FL 33070

New Mailing Address:

FEI Number: 76-0810356 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACE, BRENDA
613 CUDA LANE
KEY LARGO, FL 33037 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: DP ( ) Delete
Name: FORD, RICHARD
Address: PO BOX 2724
City-St-Zip: KEY LARGO, FL 33037

Title: VP ( ) Delete
Name: MACE, GARY
Address: 613 CUDA LANE
City-St-Zip: KEY LARGO, FL 33037

Title: DT ( ) Delete
Name: MACE, BRENDA
Address: 613 CUDA LANE
City-St-Zip: KEY LARGO, FL 33037

Title: S ( ) Delete
Name: BARBER, DIANN
Address: 100 OCEAN DRIVE
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: MACE, GARY
Address: 613 CUDA LANE
City-St-Zip: KEY LARGO, FL 33037

Title: VP (X) Change ( ) Addition
Name: DAWSON, DAN
Address: 100 OCEAN DRIVE
City-St-Zip: KEY LARGO, FL 33037

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

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 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: BRENDA MACE DT 04/09/2007
Electronic Signature of Signing Officer or Director — Date