

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17313

FILED  
Apr 09, 2006  
Secretary of State

Entity Name: DOWN UNDER DIVE CLUB, INC.

## Current Principal Place of Business:

P O BOX 360105  
MELBOURNE, FL 329360105

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 360105  
MELBOURNE, FL 329360105

## New Mailing Address:

FEI Number: 59-2965130

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GIVEN, ED  
2321 ROYAL POINCIANA BLVD.  
MELBOURNE, FL 32935 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: P ( ) Delete  
Name: BUCK, DEBI  
Address: 591 PORT MALABAR BLVD NE  
City-St-Zip: PALM BAY, FL 329054406

Title: DSO ( ) Delete  
Name: AUDET, AL  
Address: 305 HAILWOOD DRIVE  
City-St-Zip: MELBOURNE, FL 32901

Title: VP ( ) Delete  
Name: UHLAND, KELLY R  
Address: 150 HIGHWAY A1A, UNIT 301  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: T ( ) Delete  
Name: GIVEN, ED  
Address: 2321 ROYAL POINCIANA BLVD.  
City-St-Zip: MELBOURNE, FL 329352114

Title: S ( ) Delete  
Name: LEFAVOR, LAUREL  
Address: 815 ALTAMIRA ST. NW  
City-St-Zip: PALM BAY, FL 32907

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WHEAT, MICHAEL  
Address: 743 CONESTEE DR  
City-St-Zip: WEST MELBOURNE, FL 32904 US

Title: DSO (X) Change ( ) Addition  
Name: AUDET, AL  
Address: 305 HAILWOOD DRIVE  
City-St-Zip: MELBOURNE, FL 32901 US

Title: VP (X) Change ( ) Addition  
Name: CARMICHAEL, BOB  
Address: 1180 SPRING OAK DR  
City-St-Zip: MELBOURNE, FL 32901 US

Title: T (X) Change ( ) Addition  
Name: GIVEN, ED  
Address: 2321 ROYAL POINCIANA BLVD.  
City-St-Zip: MELBOURNE, FL 329352114 US

Title: S (X) Change ( ) Addition  
Name: LEFAVOR, LAUREL  
Address: 815 ALTAMIRA ST. NW  
City-St-Zip: PALM BAY, FL 32907 US

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: ED GIVEN

T

04/09/2006

Electronic Signature of Signing Officer or Director

Date