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Apr 24 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N17664 (6)

1. Corporation Name

FLORIDA ASSOCIATION OF DIVE OPERATORS, INC.



Principal Place of Business

Mailing Address

2409 RAMBLE WOOD CT.
TALLAHASSEE FL 32303
US51 GARDEN COVE ROAD
KEY LARGO FL 33037-5005
US3. Date Incorporated or Qualified
11/05/19863a. Date of Last Report
05/01/19964. FEI Number
59-2820189Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SLATE, SPENCER
51 GARDEN COVER DRIVE
KAY LARGO FL 3305781 Name
R. MICHAEL HILL
82 Street Address (P.O. Box Number is Not Acceptable)
1415 BAKER COURT
83
84 City
PANAMA CITY
FL 85 Zip Code
32401

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

R. MICHAEL HILL, EXECUTIVE DIRECTOR 3/31/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
ST
APPLEBOOM, JOHN
STREET ADDRESS
1631 E EDGEWOOD DR
CITY - ST - ZIP
LAKELAND FL ☐ DELETETITLE
NAME
D
DRAFFIN, JACKIE
STREET ADDRESS
10075 EAST ADAMO AVE
CITY - ST - ZIP
TAMPA FL ☐ DELETETITLE
NAME
V
INMAN, DAVE
STREET ADDRESS
8023 HOLLYWOOD BLVD.
CITY - ST - ZIP
HOLLYWOOD FL ☒ DELETETITLE
NAME
P
SLATE, SPENCER
STREET ADDRESS
51 GARDEN COVE ROAD
CITY - ST - ZIP
KEY LARGO FL ☐ DELETETITLE
NAME
D
KELLUM, KEN
STREET ADDRESS
4600 S. CLEVELAND AVE
CITY - ST - ZIP
FT. MYERS FL ☐ DELETETITLE
NAME
D
MATTHEWS, CHARLES
STREET ADDRESS
4633 S. LEJEUNE RD
CITY - ST - ZIP
MIAMI FL ☒ DELETE1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP ☐ Change ☐ Addition2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP ☐ Change ☐ Addition3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP ☐ Change ☐ Addition4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP ☐ Change ☐ Addition5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP ☐ Change ☐ Addition6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP ☒ Change ☐ Addition
DIRECTOR
R. MICHAEL HILL
1415 BAKER COURT
PANAMA CITY, FL 32401

14. I do 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 annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0024484

R. MICHAEL HILL 3/31/97 904 386-5245

CR2E037 (9/96)