FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUI Corporatio	MENT # N1766	4 (6)					
FLORIDA ASSOCIATION OF DIVE OPERATORS, INC.							
Principal Plac	e of Business	Mailing Address				. 0.131.1 0.101.1 0.101.1 10.11 10.11	
2409 RAMBLE WOOD CT. 61-CARDEN-COVE-ROAD-					Date Incorporated or Qualified		
TALLAHASSEE FL 32303 US		KEY-LARGO FL-33337-		11/05/1986			
		•			4. FEI Number	Applied For	
2. Principal P	lace of Business	2a. Mailing Address			59-2820189	Not Applicable	
21		26 P.D. Box 1	150L	-B	5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
Suite, Apt	#, elc	Suite, Apt #, etc.			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State		City & State	7		7. Is this nonprofit corporation a homeowners		
23		28 PANDMA	<u> </u>	1.72] No	
Zip	Country	Zip	Count	Ty	8. This corporation owes or has paid the curr		
24	[25] 9. Name and Address of Curren		30	72	Personal Property Tax due June 30. 10. Name and Address of New Registered A	Yes L No	
			8	1 Name			
HILL, R. MICHAEL			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
1415 BAKER COURT			6	3			
PANAMA	CITY FL 32401						
			8		FL	85 Zip Code	
office of ragent. I a	registered agent, or both, in the state im familiar with, and accept the obliga Signature, type-Tex product name of registered age OF FICERS AN	SION) oldsodgge koldt brusto			rporation submits this statement for the purpose of alion's board of directors. I hereby accept the appointment of the purpose of alion's board of directors. I hereby accept the appointment of the purpose of alion's board of directors. I hereby accept the appointment of the purpose of alion's board of directors. I hereby accept the appointment of the purpose of alion's board of directors. I hereby accept the appointment of the purpose of alion's board of directors. I hereby accept the appointment of the purpose of alion's board of directors. I hereby accept the appointment of the purpose of alion's board of the purpose of alion's board of the purpose of the appointment of the purpose of the purp		
TITLÉ	ST	DELETE	1.1 1911		ADDITIONS/CHANGES TO OFFICENS AND	Change Addition	
NAME	APPLEBOOM, JOHN		1,2 NAM				
STREET ADDRESS	1631 E EDGEWOOD DR		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	LAKELAND FL	- December		- ST - ZIP		D of the D Addition	
TITLE NAME	DRAFFIN, JACKIE	☐ DELETE	2.1 TITLE 2.2 NAM	1		Change Addition	
STREET ADDRESS	10075 EAST ADAMO AVE			ET ADDRESS			
CITY - ST - ZIP	TAMPA FL			r-S1-7IP	e de la companya de		
TITLE	P	DELETE	317171	F		☐ Change ☐ Addition	
NAME	SLATE, SPENCER		3 2 NAM	- 1			
STREET ADDRESS	51 GARDEN COVE ROAD		. I	ET ADORESS			
CHTY-ST-ZIP	KEY LARGO FL	DELETE	4.1 7(1)	(-ST-ZIP		Change Addition	
NAME	KELLUM, KEN	-	4. 2 NAN				
STREET ADDRESS	4600 S. CLEVLAND AVE		4.3 STRE	EET ADDRESS			
CITY-SI-ZIP	FT. MYERS FL			- ST - ZIP			
HILF	D	☐ DELETE	5.1 TITLE			Change Addition	
NAME DEDCE LABORITOR	HILL, R. MICHAEL		5.2 NAM	I			
STREET ADDRESS CITY-ST-ZIP	1415 BAKER COURT PANAMA CITY FL		5.4 CITY	ET ADDRESS			
TITLE	PANAMA OITI TE	DECETE	6.1 TITLE			Change Addition	
NAME			62 NAM	1		-	
STREET ADDRESS			63 STRE	EET ADDRESS			
CITY-ST-ZIP			6.4 CITY	-S1-ZIP			

Theretry 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 arrival report or supplemental arrival 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 of life reserver 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 grantiged, or of an atlat himent with an address.

SIGNATURE:

FILED

Apr 22 1998 8:00am

Secretary of State