

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N40668 (8)**

1. Corporation Name

Coastal Underwater Dive Addicts, Inc.

Principal Place of Business

Mailing Address

*4801 Dreher Trail North
WEST PALM BEACH, FL 33405*

*201 INLET WAY #6
PALM BEACH SHORES, FL
33404*

3. Date Incorporated or Qualified

10/3/90

3a. Date of Last Report

03/16/95

4. FEI Number

65-0240514

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

*Christiansen, Jennifer C.
201 Inlet Way #6
Palm Beach Shores, FL 33404*

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, or 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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	MARK WINJE	
STREET ADDRESS	1985 Highland Dr.	
CITY - ST - ZIP	JUNO BEACH, FL 33408	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	Virginia Connelly	
STREET ADDRESS	5802 58TH WAY	
CITY - ST - ZIP	WPB, FL 33407	
TITLE	T	<input type="checkbox"/> DELETE
NAME	PAUL HARRINGTON	
STREET ADDRESS	904 Alamanda Dr	
CITY - ST - ZIP	NORTH PALM BEACH, FL 33408	
TITLE	CEO	<input type="checkbox"/> DELETE
NAME	Jennifer Christiansen	
STREET ADDRESS	201 Inlet Way #6	
CITY - ST - ZIP	Palm Beach Shores, FL 33404	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

600001800236
-04729/96--01136--023
***70.00

4.29.96 JR

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-24-96

407/845-8433

CR2E037 (12/95)