

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 25 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N43941 (6)

1. Corporation Name
TREASURE COAST DIVE CLUB, INC.



Principal Place of Business Mailing Address
399 SEABROOK RD. PO BOX 7424
TEQUESTA FL 33478 JUPITER FL 33468-7424

3. Date Incorporated or Qualified 06/17/1991
3a. Date of Last Report 04/15/1996

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 900 Old Town Av. 27
City & State City & State
23 Jupiter, Fl. 28
Zip Country Zip Country
24 33468 25 Palm Beach 29 30

4. FEI Number NOT APPLICABLE 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

9. Name and Address of Current Registered Agent
QUEENAN, MARK
12647 160TH ST.
JUPITER FL 33478

10. Name and Address of New Registered Agent
81 Name Paul Frankle
82 Street Address (P.O. Box Number is Not Acceptable) 192 Greentree Cir.
83 Jupiter, Fl.
84 City Jupiter, FL 85 Zip Code 33468

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 17.0503, Florida Statutes.
SIGNATURE Paul Frankle DATE 2/15/97

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	QUEENAN, MARK	
STREET ADDRESS	12647 160TH ST.	
CITY - ST - ZIP	JUPITER FL 33478	
TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	FRANKLE, PAUL	
STREET ADDRESS	192 GREENTREE CIR.	
CITY - ST - ZIP	JUPITER FL 33468	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	FRANKLE, SANDY	
STREET ADDRESS	192 GREENTREE CIR.	
CITY - ST - ZIP	JUPITER FL 33468	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	WAGNER, VALERIE	
STREET ADDRESS	13454 COLUMBINE AVE.	
CITY - ST - ZIP	WELLINGTON FL 33414	
TITLE	DC	<input checked="" type="checkbox"/> DELETE
NAME	WAGNER, KEITH	
STREET ADDRESS	13454 COLUMBINE AVE.	
CITY - ST - ZIP	JUPITER FL 33414	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Paul Frankle	
1.3 STREET ADDRESS	192 Greentree Cir.	
1.4 CITY - ST - ZIP	Jupiter, FL 33468	
2.1 TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Jeff Marchal	
2.3 STREET ADDRESS	12095 179th Court N.	
2.4 CITY - ST - ZIP	Jupiter, FL 33478	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Joan Cooper	
4.3 STREET ADDRESS	18384 SE Heritage Dr.	
4.4 CITY - ST - ZIP	Tequesta, FL 33469	
5.1 TITLE	DC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Mark Queenan	
5.3 STREET ADDRESS	12647 160th St.	
5.4 CITY - ST - ZIP	Jupiter, FL 33478	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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: Sandra M. Mortham DATE 02/15/97 (561) 745-1167

CR2E037 (9/96)