2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 22, 2008
Secretary of State

DOCUMENT# N48035

Entity Name: CARIBBEAN SHIPWRECK RESEARCH INSTITUTE, INC.

Current Principal Place of Business:

4401 S.W. BOAT RAMP AVENUE
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

4401 S.W. BOAT RAMP AVENUE
PALM CITY, FL 33990

New Mailing Address:

FEI Number: 65-0321187 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KIMBELL, JOSEPH T.
4401 S.W. BOAT RAMP AVENUE
PALM CITY, FL 34990 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: KIMBELL, JOSEPH T
Address: 4401 S.W. BOAT RAMP AVENUE
City-St-Zip: PALM CITY, FL 33990

Title: T ( ) Delete
Name: KIMBELL, JOAN J
Address: 4401 S.W. BOAT RAMP AVENUE
City-St-Zip: PALM CITY, FL 33990

Title: S ( ) Delete
Name: BENSON, ROBERT J
Address: 1222 FRANKLIN DRIVE
City-St-Zip: PORT ORANGE, FL 32129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: BENSON, ROBERT J
Address: P.O. BOX 780245
City-St-Zip: ORLANDO, FL 32878

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT J BENSON S 06/22/2008

Electronic Signature of Signing Officer or Director — Date