

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 # N95000000993 (4)

1. Corporation Name

KARST UNDERWATER RESEARCH, INC.



Principal Place of Business

3027 W BAY VILLA AVE
TAMPA FL 33611-1607

Mailing Address

3027 W BAY VILLA AVE
TAMPA FL 33611-1607

3. Date Incorporated or Qualified

02/27/1995

3a. Date of Last Report

2. Principal Place of Business

21 4800 S. Westshore Blvd

Suite, Apt. #, etc.

22 # 326

City & State

23 Tampa Florida

Zip

24 33611

Country

25 USA

2a. Mailing Address

26 P.O. Box 13097

Suite, Apt. #, etc.

27

City & State

28 Tampa Florida

Zip

29 33681

Country

30 USA

4. FEI Number

59-3302373

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

PETERSEN, JEFF J
3027 W BAY VILLA AVE
TAMPA FL 33611-1607

10. Name and Address of New Registered Agent

81 Name Jeff Petersen

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

4800 S. Westshore Blvd

83 # 326

84 City Tampa

FL

85 Zip Code

33611

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 of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

3/23/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

Jeff Petersen

3/23/96

(813) 346-7617

Office Phone #

CR2E037 (12/95)