

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000792

FILED
Jan 12, 2006
Secretary of State

Entity Name: ATLANTIC DIVING TEAM BOOSTER CLUB, INC.

Current Principal Place of Business:

3029 NW 118 DRIVE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

8735 RAMBLEWOOD DR.
APT # 115
CORAL SPRINGS, FL 33071

Current Mailing Address:

P.O. BOX 8316
CORAL SPRINGS, FL 33075

New Mailing Address:

FEI Number: 65-0829670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBERTY, OSVALDO
3029 NW 118 DRIVE
CORAL SPRINGS, FL 33075 US

Name and Address of New Registered Agent:

ALBERTY, OSVALDO
8735 RAMBLEWOOD DR.
APT # 115
CORAL SPRINGS, FL 33071 US

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:

01/12/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: LEMBECK, LAURA
Address: 21932 TOWN PLACE DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: PD () Delete
Name: ALBERTY, OSVALDO
Address: 3029 NW 118 DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VD () Delete
Name: CRUZ, JO-ANA
Address: 3029 NW 118 DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: TD () Delete
Name: ALBERTY, ORLANDO
Address: 400 SW 68 TERRACE
City-St-Zip: MARGATE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: ALBERTY, OSVALDO
Address: 8735 RAMBLEWOOD DR. #115
City-St-Zip: CORAL SPRINGS, FL 33071

Title: PD (X) Change () Addition
Name: ALBERTY, OSVALDO
Address: 8735 RAMBLEWOOD DR. #115
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VD (X) Change () Addition
Name: ALBERTY, JO-ANA
Address: 8735 RAMBLEWOOD DR. #115
City-St-Zip: CORAL SPRINGS, FL 33071

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

I hereby certify that the information supplied with this filing does not qualify for the 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: OSVALDO ALBERTY

PD

01/12/2006

Electronic Signature of Signing Officer or Director

Date