Mar 29, 2002 8:00 am **Secretary of State**

03-29-2002 91221 044 ***150.00

2002 Uniform Business Report (UBR) P01000045308 DOCUMENT # 1. Entity Name CLEARWATER DIVE & TRAVEL, INC. Principal Place of Business Mailing Address 2126 DREW STREET 2126 DREW STREET **CLEARWATER FL 33765 CLEARWATER FL 33765** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Country Zip Country

DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 Zip Code City 8. 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. (9/01) ☐ Addition ☐ Change TITLE ☐ Delete TITLE REID. JEFFREY NAME NAME STREET ADDRESS STREET ADDRESS 2126 DREW STREET CITY-ST-ZIP CLEARWATER FL 33765 CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE TITLE NAME GRUBBS, CARL NAME STREET ADDRESS STREET ADDRESS 2126 DREW STREET CITY-ST-ZIP **CLEARWATER FL 33765** CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME GRINDEY, BRIAN R NAME STREET ADDRESS STREET ADDRESS 2126 DREW STREET CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 33765** Addition ☐ Delete TITLE ☐ Change TITLE NAME GRINDEY, ELIZABETH A NAME STREET ADDRESS STREET ADDRESS 2126 DREW STREET CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33765 ☐ Change ☐ Addition ☐ Delete TITL F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.