

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000012477

FILED
Mar 17, 2005
Secretary of State

Entity Name: AMERICAN NAUTICAL DIVING AND RESEARCH/RECOVERY, INC.

Current Principal Place of Business:

1480 WARRIOR TRAIL
ENTERPRISE, FL 32725

New Principal Place of Business:

Current Mailing Address:

1480 WARRIOR TR.
ENTERPRISE, FL 32725

New Mailing Address:

FEI Number: 42-1598986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORAN, DAVID P ESQ
608 WHITEHEAD ST.
KEY WEST, FL 33040 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: YERIAN, THOMAS R
Address: 1621 RITTER CIRCLE
City-St-Zip: PORT ROYAL, SC 29935

Title: DVT () Delete
Name: NANSTIEL, WILLIAM D
Address: 226 ENTERPRISE RD.
City-St-Zip: OSTEEN, FL 32764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVT (X) Change () Addition
Name: NANSTIEL, WILLIAM D
Address: 1480 WARRIOR TR.
City-St-Zip: ENTERPRISE, FL 32725

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM D. NANSTIEL

DVT

03/17/2005

Electronic Signature of Signing Officer or Director

_____ Date