

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 24, 2003 8:00 am**  
**Secretary of State**

04-24-2003 90222 043 \*\*\*150.00

0177098 AV

DOCUMENT # P02000013091

1. Entity Name  
SCUBA DO OF KEY LARGO INC.



Principal Place of Business  
17 TRANSYLVANIA AVE.  
KEY LARGO FL 33037

Mailing Address  
17 TRANSYLVANIA AVE.  
KEY LARGO FL 33037



2. Principal Place of Business

522 CARIBBEAN DRIVE

3. Mailing Address

8 S. ANDROS ROAD

Suite, Apt. #, etc.

SLIP # 6

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

ADDRESS Change

City & State

Key Largo, FL.

City & State

Key Largo, FL.

4. FEI Number

41-2026329

Applied For

Not Applicable

Zip

33037

Country

USA

Zip

33037

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VOLPE, LAURIE  
17 TRANSYLVANIA AVE.  
KEY LARGO FL 33037

7. Name and Address of New Registered Agent

Name  
SAME

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

CK #  
520  
\$150.00

9. Election Campaign Financing  
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P  
NAME STEWART, RICHARD A  
STREET ADDRESS 17 TRANSYLVANIA AVE.  
CITY-ST-ZIP KEY LARGO FL 33037 ☐ Delete

TITLE VP  
NAME VOLPE, LAURIE  
STREET ADDRESS 17 TRANSYLVANIA AVE.  
CITY-ST-ZIP KEY LARGO FL 33037 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT  
NAME RICHARD A. STEWART ☒ Change ☐ Addition  
STREET ADDRESS 8 S. ANDROS ROAD  
CITY-ST-ZIP KEY LARGO, FL. 33037

TITLE VICE PRESIDENT  
NAME LAURIE VOLPE ☒ Change ☐ Addition  
STREET ADDRESS 8 S. ANDROS ROAD  
CITY-ST-ZIP KEY LARGO, FL. 33037

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)