

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000002945

Entity Name: ATLANTIC OCEANEERING, INC.

FILED
Jan 30, 2006
Secretary of State

Current Principal Place of Business:

9353 MYSTIC COVE TERRACE
HOBE SOUND, FL 33455

New Principal Place of Business:

7366 SW 39TH STREET
PALM CITY, FL 34990

Current Mailing Address:

POST OFFICE BOX 1335
HOBE SOUND, FL 33475

New Mailing Address:

7366 SW 39TH STREET
PALM CITY, FL 34990

FEI Number: 55-0888885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

TRENTER, ADAM T PSTD
7366 SW 39TH STREET
PALM CITY, FL, FL 34990 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: ADAM TRENTER

01/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: TRENTER, ADAM T
Address: 9353 MYSTIC COVE TERRACE
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: TRENTER, ADAM T
Address: 7366 SW 39TH STREET
City-St-Zip: PALM CITY, FL 34990

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADAM TRENTER

PSTD

01/30/2006

Electronic Signature of Signing Officer or Director

Date