

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000051576

FILED  
Jul 06, 2006  
Secretary of State

Entity Name: KEY WEST TECH DIVING INC.

## Current Principal Place of Business:

BOCA CHICA NAS MARINA  
A37  
KEY WEST, FL 33040

## New Principal Place of Business:

5950 PENINSULAR AVE  
F-25  
KEY WEST, FL 33040

## Current Mailing Address:

819 PEACOCK PLAZA  
#573  
KEY WEST, FL 33040

## New Mailing Address:

FEI Number: 20-2628432      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WOODS, MARK L  
819 PEACOCK PLAZA  
573  
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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WOODS, MARK L CAPTAIN  
Address: 819 PEACOCK PLAZA #573  
City-St-Zip: KEY WEST, FL 33040 US

Title: VP ( ) Delete  
Name: O'KEEFE, ERIC J  
Address: 3920 SOUTH ROOSEVELT DR  
City-St-Zip: KEY WEST, FL 33040

Title: SEC ( ) Delete  
Name: WOODS, JONATHAN M  
Address: 1507 CANYON CT  
City-St-Zip: PORT ORCHARD, WA 98366

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: MUSINGER, LYNDIA  
Address: 5950 PENINSULAR AVE #601  
City-St-Zip: KEY WEST, FL 33040

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

SIGNATURE: MARK LOUIS WODS

PRES

07/06/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date