

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000051576

Entity Name: KEY WEST TECH DIVING INC.

FILED
Jul 23, 2007
Secretary of State

Current Principal Place of Business:

5950 PENINSULAR AVE
F-25
KEY WEST, FL 33040

New Principal Place of Business:

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: MUSINGER, LYNDIA
Address: 5950 PENINSULAR AVE #601
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: () Change () Addition
Name:
Address:
City-St-Zip:

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

I hereby certify that the information supplied with this filing does not qualify 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 L WOODS

P

07/23/2007

Electronic Signature of Signing Officer or Director

Date