2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000061458

1. Entity Name
D.D. DIVING, INC.

Principal Place of Business	Mailing Address
5390 NE 180TH AVENUE WILLISTON, FL 32696 US	5390 NE 180TH AVENUE WILLISTON, FL 32696 US

DO NOT WRITE IN THIS SPACE

02252006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3203173
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SCHWIEBERT, KEN
173 N MAIN STREET
WILLISTON, FL 32696

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	WEBBER, RAYMOND T
STREET ADDRESS	P.O. DRAWER 260
CITY-ST-ZIP	WILLISTON, FL 32696
TITLE	ST
NAME	SCHWIEBERT, KENNETH
STREET ADDRESS	173 N MAIN ST
CITY-ST-ZIP	WILLISTON, FL 32601
TITLE	VP
NAME	HOLT, DENNIS
STREET ADDRESS	1590 NE WILLIAMSON BLVD.
CITY-ST-ZIP	BEND, OR 97701
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/23/06-80044-009 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Kenneth Schwiebert Kenneth Schwiebert 3/12/06 352-528-3374
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #