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Mar 04, 1999 8:00 am
Secretary of State

0530350

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

03-04-1999 90042 037 ***150.00

DOCUMENT # P94000024608

1. Corporation Name

DIVERS' DEN OF PENSACOLA, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 518 NORTH NINTH AVENUE PENSACOLA FL 32501

Mailing Address 518 NORTH NINTH AVENUE PENSACOLA FL 32501

3. Date Incorporated or Qualified 03/23/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number 59-3243010

Applied For Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired \$8.75 Additional Fee Required

City & State

City & State

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

Zip

Country

Zip

Country

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MOONEYHAM, MICHELLE 518 NORTH NINTH AVENUE PENSACOLA FL 32501

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETE

NAME MOONEYHAM, JOEL STREET ADDRESS 4330 COSTA MESA CITY-ST-ZIP PENSACOLA FL 32504

1.1 TITLE Change Addition

TITLE D DELETE

NAME MOONEYHAM, MICHELLE STREET ADDRESS 4330 COSTA MESA CITY-ST-ZIP PENSACOLA FL 32504

2.1 TITLE Change Addition

TITLE DELETE

NAME STREET ADDRESS CITY-ST-ZIP

3.1 TITLE Change Addition

TITLE DELETE

NAME STREET ADDRESS CITY-ST-ZIP

4.1 TITLE Change Addition

TITLE DELETE

NAME STREET ADDRESS CITY-ST-ZIP

5.1 TITLE Change Addition

TITLE DELETE

NAME STREET ADDRESS CITY-ST-ZIP

6.1 TITLE Change Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature and typed name of signing officer or director: Joel Mooneyham

Date: 2/13/99 <850> 438-0650

Date

Daytime Phone #

CR2E034 (1/198)