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Mar 13 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000051120 (0)

1. Corporation Name  
EXTREME DIVERS, INC.



Principal Place of Business Mailing Address  
200 HERON'S RUN DRIVE STE 204 200 HERON'S RUN DRIVE STE 204  
SARASOTA FL 34232 SARASOTA FL 34232-1742

3. Date Incorporated or Qualified 06/28/1995 3a. Date of Last Report 04/12/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21. State, Apt. #, etc.	26. State, Apt. #, etc.	65-0590194	Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes No

9. Name and Address of Current Registered Agent

ROGERS, JOHN B  
200 HERON'S RUN DRIVE STE 204  
SARASOTA FL 34232

10. Name and Address of New Registered Agent

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 (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ROGERS, JOHN B 200 HERON'S RUN DRIVE STE 204 SARASOTA FL 34232	1.1 TITLE	Change Addition
NAME	D DAVIS, DAVE 15957 KUYKENDAHL HOUSTON TX 77068	1.2 NAME	Change Addition
STREET ADDRESS		1.3 STREET ADDRESS	Change Addition
CITY, ST, ZIP		1.4 CITY-ST-ZIP	Change Addition
TITLE		2.1 TITLE	Change Addition
NAME		2.2 NAME	Change Addition
STREET ADDRESS		2.3 STREET ADDRESS	Change Addition
CITY, ST, ZIP		2.4 CITY-ST-ZIP	Change Addition
TITLE		3.1 TITLE	Change Addition
NAME		3.2 NAME	Change Addition
STREET ADDRESS		3.3 STREET ADDRESS	Change Addition
CITY, ST, ZIP		3.4 CITY-ST-ZIP	Change Addition
TITLE		4.1 TITLE	Change Addition
NAME		4.2 NAME	Change Addition
STREET ADDRESS		4.3 STREET ADDRESS	Change Addition
CITY, ST, ZIP		4.4 CITY-ST-ZIP	Change Addition
TITLE		5.1 TITLE	Change Addition
NAME		5.2 NAME	Change Addition
STREET ADDRESS		5.3 STREET ADDRESS	Change Addition
CITY, ST, ZIP		5.4 CITY-ST-ZIP	Change Addition
TITLE		6.1 TITLE	Change Addition
NAME		6.2 NAME	Change Addition
STREET ADDRESS		6.3 STREET ADDRESS	Change Addition
CITY, ST, ZIP		6.4 CITY-ST-ZIP	Change Addition

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John B. ROGERS  
President

3-10-97 941-379-6149

CR2E034 (9/96)