

# 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000062619

Entity Name: BLUE PLANET DIVE & SURF, INC.

FILED  
Sep 18, 2009  
Secretary of State

## Current Principal Place of Business:

125 SW PORT ST LUCIE BLVD  
PT ST LUCIE, FL 34984

## New Principal Place of Business:

## Current Mailing Address:

125 SW PORT ST LUCIE BLVD  
PT ST LUCIE, FL 34984

## New Mailing Address:

FEI Number: 65-0598661

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NEVILLE, KIRK  
2981 SE MORNINGSIDE BLVD  
PT ST LUCIE, FL 34952 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

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: NEVILLE, KIRK  
Address: 125 SW PORT ST LUCIE BLVD  
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: S ( ) Delete  
Name: CUNNINGHAM, ROBERT M  
Address: 1218 SE MANTH LN  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: S ( ) Delete  
Name: OWENS, JEREMIAH  
Address: 6462 FAGAN ST.  
City-St-Zip: PORT ST. LUCIE, FL 34986

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: NEVILLE, KIRK  
Address: 125 SW PORT ST LUCIE BLVD  
City-St-Zip: PORT ST LUCIE, FL 34984

Title: S (X) Change ( ) Addition  
Name: NEVILLE, KIRK  
Address: 125 SW PORT ST LUCIE BLVD  
City-St-Zip: PORT ST LUCIE, FL 34984

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: KIRK NEVILLE

PRES

09/18/2009

Electronic Signature of Signing Officer or Director

Date