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PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

<u>19</u>98

DOCUMENT #

P96000056269 (9)

CAPTAIN SCUBA LEASING CO., INC.

FILED May 08 1998 8:00am Secretary of State



Mailing Address Principal Place of Business 116 LARID CIRCLE 116 LARID CIRCLE PANAMA CITY BEACH FL 32408 PANAMA CITY BEACH FL 32408 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/03/1996 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 59-3391602 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intangible Zip Country Z_{10} Yes Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent A1 Name PAPROCKI, CHARLES 116 LARID CIRCLE Street Address (P.O. Box Number is Not Acceptable) 82 PANAMA CITY BEACH FL 32408 83 84 Zip Code City 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 reinstaling) Signature, typed or pointed name of regelered agent and little if apple able ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. Change Addition DELETE 1.1 TITLE TITLE PAPROCKI, CHARLES A NAME 1.2 NAME 116 LAIRD CIRCLE 1.3 STREET ADDRESS STREET ADDRESS PANAMA CITY BEACH FL 1.4 CITY-S1-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 2.1 TITLE TITLE BUSH, KEVIN M NAME 2.2 NAME 2125 LAURIE AVE 2.3 STREET ADDRESS STREET ADDRESS PANAMA CITY BEACH FL CITY-ST-ZIP 2. 4 CITY - ST- ZIP Change Addition DELETE 3.1 TITLE TITLE PAPROCKI, JOAN M 3.2 NAME NAME 116 LAIRD CIRCLE 3.3 STREET ADDRESS STREET ADDRESS PANAMA CITY BEACH FL 3 4. CITY - ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CHY-ST-ZIP CITY-ST-ZIP DELETE. 6.1 1DLE Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.