## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999

DOCUMENT # P96000075848 1. Corporation Name

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

VP

CITY-ST-ZIP

TITLE UP

NAME

TITLE

NAME

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LARRY IVEY

ALAN WALDEN

3047 SARATOGA DR.

ORLANDO, FL 32806

1438 HYDE PARK DR.

UNDERWATER SCIENCE RESEARCH AND DEVELOPMENT, INC.

| Principal Plac            | e of Business   |   |                |                                  |   |   |                           |
|---------------------------|---|---|----------------|----------------------------------|---|---|---------------------------|
| 37150                     | 37150 CHANCEY ROAD 37.150 CHANCEY ROAD  |   |                |                                  |   |   |                           |
| <b>I</b>                  | ZEPHYRHILLS, FL 33541 ZEPHYRHILLS, FL 33541   |   |                | 541                              | DO NOT WRITE IN THIS SPACE  |   |                           |
| US US                     |   |   |                | 3. Date Incorporated or Qualifed |   |   |                           |
| 03                        |   | 03  |                |                                  | 00/00/1006  |   |                           |
| 2. Principal P            | lace of Business  | 2a. Mailing Address   |                |                                  | 09/09/1996<br>4. FEI Number   | A   | pplied For                |
| 21                        |   | 26  |                |                                  | 59-3400065  | N   | lot Applicable            |
| Suite, Apt.               | #, etc.   | Suite, Apt. #, etc.   |                |                                  | 5. Certificate of Status Desired  | \$8.75  | Additional                |
| 22                        |   | 27  |                |                                  | 5. Certificate of Status Desired  | LJ Fee R                                      | equired                   |
| City & Stat               | e   | City & State  |                |                                  | 6. Election Campaign Financing  | _ \$5.00                                      | May Be                    |
| 23                        |   | 28  |                |                                  | Trust Fund Contribution   |   | to Fees                   |
| Zip -                     | - Country   | Zip   | Countr         | y                                | 8. This corporation owes the curre  |   |                           |
| 24                        | 25  | 29  | 30             |                                  | Personal Property Tax.  | Yes   | □No                       |
|                           | 9. Name and Address of Current  | Registered Agent  |                |                                  | 10. Name and Address of New R   | egistered Agent                               |                           |
| 1                         |   |   | 81             | Name                             |   |   |                           |
| DENNIS G. BULIN 82 Street |   |   |                | Stroot Addre                     | ess (P.O. Box Number is Not Acceptal  | blo   |                           |
| 37150 CHANCEY ROAD        |   |   |                | Street Addit                     | ess (F.O. Box Number is Not Acceptai  | bie)  |                           |
| ZEPHYRHILLS, FL 33541     |   |   |                | -                                |   |   |                           |
| ZEFRIF                    | (MILLS, FL 33341  |   | ļ              |                                  |   |   |                           |
|                           |   |   | 84             | City                             |   | FL 85 Zip                                     | Code                      |
| office or n               | to the provisions of Sections 607.0502<br>egistered agent, or both, in the State om<br>familiar with, and accept the obligati | f Florida, Such change was au<br>ons of, Section 607.0505, Flor | ithorized by   | the corporatio                   | oration submits this statement for the prin's board of directors. I hereby accept | ourpose of changing its the appointment as re | s registered<br>egistered |
| SIGNATURE                 | Signal a, typed or printed name of registered agent   | and title if applicable. (NOTE                                  | Registered Age | nt signature required            | when reinstating)   | DATE  |                           |
| 12.                       | OFFICERS AND  |   | 13.            |                                  | ADDITIONS/CHANGES TO OFF  | ICERS AND DIRECT                              | ORS IN 12                 |
| TITLE P                   | S/VP (New +old  | DELETE  | 1.1 TITLE      |                                  | 5/VP  | Change  | Addition                  |
| NAME                      | PECORARO, MARK  | ,   | 1.2 NAME       |                                  |   |   |                           |
| STREET ADDRESS            | 3905 RYANS LANE   |   | 1.3 STREE      | TADDRESS                         |   |   |                           |
| CITY-ST-ZIP               | ZEPHYRHILLS, FL 335   | 144   | 1.4 CITY-      | ST-ZIP                           |   |   |                           |
| TITLE S/V                 | T/VP (New title   |   | 2.1 TITLE      | -                                | TIVP  | ☐ Change                                      | Addition                  |
| NAME                      | · · · · · · · · · · · · · · · · · · ·   | د ع   | 2.2 NAME       |                                  |   |   |                           |
| STREET ADDRESS            | DENNIS G. BULIN   |   | N              | TADDRESS                         |   |   |                           |
| CITY-ST-ZIP               | 29238 CITRUS TRACE  | WAY   | 2 4 CITY-      |                                  |   |   |                           |
| TITLE V D                 | WESUEYHCHAPELELFL 3   | 3544   DELETE   | 3.1 TITLE      | JI-LIF                           | <del></del>   | Change  | ☐ Addition                |
| J 1                       | P (New xit)   |   | 32 NAME        |                                  |   |   |                           |
| NAME                      | GEORGE HUGUS  | <u>-</u>  | -6             | -                                |   |   |                           |
| STREET ADDRESS            | 2903 FIELDCREST CT.   |   | N.             | TADDRESS                         |   |   |                           |
| CITY-ST-ZIP               |   | ☐ DELETE  | 3.4. CITY-     | ST- ZIP                          |   | ☐ Change                                      | □ Addition                |
| TITLE                     | ORLANDOK FL 32829   | □ DELETE  | 4.1 TITLE      |                                  |   | Change  | L) Addition               |
| NAME                      |   |   | A 2 NAME       | 1                                |   |   | I                         |

CITY-ST-ZIP WINTER PARK, FL 32792 64 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, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

44 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.2 NAME

□ DELETE

☐ DELETE

**SIGNATURE:** 

Change

Change

Addition

Addition

May 07, 1999 8:00 am Secretary of State

05-07-1999 90022 011 \*\*\*150.00

CR2E034 (11/98)