

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
FILED**

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
CORPORATION DIVISION

MAY 1 1995

DOCUMENT # S53885

(7)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEA SPORTS & SCUBA, INC.

Principal Place of Business
3663 MCKINLEY AVE
FT MYERS FL 33901

Mailing Address
3663 MCKINLEY AVE
FT MYERS FL 33901

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification 05/14/1991	3a. Date of Last Report 06/14/1994
4. FEI Number 65-0248282	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
6. This corporation has actively participated in the election process under the Florida Statutes. ☐ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
22. State: Apt. # etc.	27. State: Apt. # etc.
23. City & State	28. City & State
24. City	29. City
25. State	30. State

9. Name and Address of Current Registered Agent

**THORN, JOHN E.
3663 MCKINLEY AVE
FT MYERS FL 33901**

10. Name and Address of New Registered Agent

81. Name
82. Street Address, P.O. Box Number or Not Applicable
83.
84. City
85. Zip Code

11. Pursuant to the provisions of Sections 607.01(1)(a) and 607.01(1)(b), 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 Sections 607.01(1)(a) and 607.01(1)(b), Florida Statutes.

SIGNATURE

Signature of Current Registered Agent

Signature of New Registered Agent

with

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	D THORN, JOHN E. 3663 MCKINLEY AVE FT MYERS FL	NAME	☐ Change ☐ Addition
STREET ADDRESS		NAME	☐ Change ☐ Addition
CITY & STATE		NAME	☐ Change ☐ Addition
NAME	D THORN, ANN K. 3663 MCKINLEY AVE FT MYERS FL	NAME	☐ Change ☐ Addition
STREET ADDRESS		NAME	☐ Change ☐ Addition
CITY & STATE		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		NAME	☐ Change ☐ Addition
CITY & STATE		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		NAME	☐ Change ☐ Addition
CITY & STATE		NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 190.03(1)(b), Florida Statutes. I further certify that this information is included in the annual report or supplemental annual report, as required, and that my signature shall have the same legal effect as if my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

John E. Thorn
John E. Thorn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95

812 374 4618