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

DOCUMENT # S88909

STEAMBOAT DIVER, INC.

(4)

**FILED PROFIT** May 08 1997 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1997 DIVISION OF CORPORATIONS

Principal Plac	e of Business	Mailing Address	Mailing Address				11911 MERIT BIBIT BIBIT BEBIT B	)18!! IBB!
P. O. BOX 1000 BRANFORD FL 32008		P. O. BOX 1000 BRANFORD FL 32008-100	P. O. BOX 1000 BRANFORD FL 32008-1000					
						3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1996		
·	lace of Business	2a. Mailing Address				4. FEI Number	<del> </del>	plied For
Suite, Apt.	# elc	Suite, Apt. #, etc.			<u> </u>	59-3092850	·	t Applicable
22	w, 610.	t	27			5. Certificate of Status Desired See Required \$8.75 Additional Fee Required		
City & Stat	e	City & State			THE RESERVE THE PARTY OF THE PA	6. Election Campaign Financing	\$5.00	<u>'</u>
23		28				Trust Fund Contribution	Added to	
Zip Country		Zip	— ¬ '			8. This corporation has liability for i	langible tax under s.	199.032,
24	25   29   30 9, Name and Address of Current Registered Agent		[30]	1		Florida Statutes VI Yes No  10. Name and Address of New Registered Agent		
^I E(	SI, DUSTIN M.	r Hegistered Agent		81	Name	10. Name and Address of New Reg	Istered Agent	
	51, DOSTIN M. HWY 27 & 129							· · · · · · · · · · · · · · · · · · ·
	NFORD FL 32008		'	B2	Street Addr	ess (P.O. Box Number is Not Acceptab	e)	
<b>5</b> ,24	THE STATE SECTION		ļ.	вз				
				B4	C3		721 77	<del></del>
			1	84	City		FL  85   Zip C	Dode
office or r agent. I a SIGNATURE	egisterod agent, or both, in the State im familiar with, and accept the obligation Signature, typed or profited name of registered agents.					oration submits this statement for the p ion's board of directors. I hereby accep ad when roinstaking)	t the appointment as	registered
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC		
TITLE	LEMBO MI ONDIO	DELETE	1.1 701.				[] Change	Addition
NAME	LEWIS, W. CHRIS 4004 PELHAM HGTS RD		1.P NAA					
STREET ADDRESS CITY-ST-ZIP	TUSCALOOSA AL				ADDRESS			
TITLE	81	DELETE	1.4 CHY-ST-ZIP 2.1 TITLE		1 - 216	<del></del>	Change	Addition
· NAME	CLESI, DUSTIN M.	-	2 P NAME					
STREET ADDRESS	U.S. HWY 27 & 129		2 B STREE		ADDRESS			
CITY-ST-ZIP	BRANFORD FL		2. 4 CITY - S1 - 7IP		51 - 7IP			
TITLE		☐ DELETE					Change	Addition
NAME			3.2 NAN					
STREET ADDRESS			1		ADDRESS			
CITY-ST-ZIP		☐ DELETE	3.4. CIT 4.1 TITL		51 - ZIP		Change	Addition
NAME	•		4. 2 NA				onunge	
STREET ADDRESS			1		ADDRESS			
CITY-ST-ZIP			4.4 C(1)					
TITLE		DELETE	5.4 7171	E			☐ Change	Addition
NAME			5.P NAN	νF				
STREET ADDRESS			5.8 S1R	EET.	ADDRESS			
CITY-ST-ZIP		Libbert	5.4 CITY		1-ZIP		——————————————————————————————————————	——————————————————————————————————————
TITLE		L DELFTE	6.0 7/11				∟_ Change	Addition
NAME Street address			MAN 9.0 are e a		ADERDESS			
CITY-ST-ZIP	100		6.8 STR 6.4 CITY		ADDRESS			
14. Ldo herel	by certify that the information supplied	with this filling does not aua	lify for the e	YO!	nuntion stated	in Section 119.07(3)(ı), Florida Statutes	. I further certify that	the
informatio I am an o appears i	n indicated on this annual report or si flicer or director of the corporation or n Block 12 or Block 13 if manghd, or	upplemental annual report is the receiver or trusted empe on an attachment with an ac	true and ac wered to ex ddress.	eci	rate and that ute this report	my signature shall have the same legal Las required by Chapter 607, Florida St	effect as if made und atutes; and that my n	der oath; that arne