

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000082769

**Entity Name:** SCUBALIFE CORP.

**Current Principal Place of Business:**

808 MOODY LANE  
FLAGLER BEACH, FL 32136

**Current Mailing Address:**

808 MOODY LANE  
FLAGLER BEACH, FL 32136

**FEI Number:** 46-2798864

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

STONEBURNER, GRESHAM R  
841 PRUDENTIAL DR, SUITE 1400  
JACKSONVILLE, FL 32207 US

*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

**Officer/Director Detail :**

Title D  
Name BLACK, LONNYE RAY  
Address 808 MOODY LANE  
City-State-Zip: FLAGLER BEACH FL 32136

Title D  
Name BLACK, LONNYE RAY II  
Address 808 MOODY LANE  
City-State-Zip: FLAGLER BEACH FL 32136

Title D  
Name BLACK, EMILY V  
Address 808 MOODY LANE  
City-State-Zip: FLAGLER BEACH FL 32136

*I hereby 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 all other like empowered.*

**SIGNATURE:** LONNYE RAY BLACK

**DIRECTOR**

**01/22/2014**

Electronic Signature of Signing Officer/Director Detail

Date