

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000021247

**Entity Name:** JACKSONVILLE SCUBANAUTS, INC.

**Current Principal Place of Business:**

1148 EAGLE POINT DR  
ST AUGUSTINE, FL 32092

**Current Mailing Address:**

1148 EAGLE POINT DR  
ST AUGUSTINE, FL 32092 US

**FEI Number:** 59-3170553

**Certificate of Status Desired:** No

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

TYDE, VICTORIA  
1148 EAGLE POINT DR  
ST AUGUSTINE, FL 32092 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:** VICTORIA TYDE

04/10/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HAGAN, ROBERT MR  
Address        3020 SECRET WOODS TRAIL W  
City-State-Zip: JACKSONVILLE FL 32216

Title            VP  
Name            NORTON, NADINE MRS  
Address        14750 BEACH BLVD  
                  78  
City-State-Zip: JACKSONVILLE FL 32250

Title            TREASURER  
Name            TYDE, VICTORIA  
Address        1148 EAGLE POINT DR  
City-State-Zip: ST AUGUSTINE FL 32092

Title            SECRETARY  
Name            BARNES, PEGGY  
Address        7780 A1A S  
                  310  
City-State-Zip: ST AUGUSTINE FL 32080

*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:** VICTORIA TYDE

**TREASURER**

04/10/2017

Electronic Signature of Signing Officer/Director Detail

Date