

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY - 1 PM 12: 45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **345417** (0)

1. Corporation Name
LOGAN DIVING, INC.

Principal Place of Business Mailing Address
5731 ST AUGUSTINE RD JACKSONVILLE FL 32207

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **04/30/1969** 3a. Date of Last Report **05/01/1994**

4. FEI Number **59-1259743** 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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

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

9. Name and Address of Current Registered Agent
**LOGAN, CAMPBELL F
5731 ST. AUGUSTINE ROAD
JACKSONVILLE FL 32207**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the filer, if applicable

NOTE: Registered Agent signature required when reconstituting

DATE

12. OFFICERS AND DIRECTORS
TITLE PD
NAME MIXER, JACK
STREET ADDRESS 2922 BERNICE CT.
CITY - ST - ZIP JAX, FL 00000
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
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NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1 1 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
2 1 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP
3 1 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP
4 1 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
5 1 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP
6 1 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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, on an attachment with an address.

SIGNATURE:

John Mixer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

427-90 904-7310000