

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 05, 2004  
Secretary of State**

DOCUMENT# 752888

Entity Name: WEST FLORIDA LIGHTNING AQUATICS, INC.

**Current Principal Place of Business:**

WFLA  
13120 VONN ROAD  
LARGO, FL 33774

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1144  
INDIAN ROCKS BEACH, FL 337851144

**New Mailing Address:**

FEI Number: 59-6582968      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

CALDWELL, KATHERINE  
106556 INDIAN HILLS COURT  
LARGO, FL 33777 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CALDWELL, KATHERINE  
Address: 106556 INDIAN HILLS COURT  
City-St-Zip: LARGO, FL 33777

Title: VP ( ) Delete  
Name: BLAZUK, ELIZABETH  
Address: 13238 87TH AVE. N  
City-St-Zip: SEMINOLE, FL 33776

Title: SD ( ) Delete  
Name: CROMER, JAYNE  
Address: 12090 77TH ST NORTH  
City-St-Zip: LARGO, FL 33773

Title: T ( ) Delete  
Name: MOSES, PATRICIA  
Address: 14195 SIESTA ROAD  
City-St-Zip: LARGO, FL 33774

Title: T (X) Delete  
Name: VILARET, MICHELE  
Address: 11688 TRADEWINDS BLVD.  
City-St-Zip: LARGO, FL 33773

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: CALDWELL, KATHARINE J  
Address: 106556 INDIAN HILLS COURT  
City-St-Zip: LARGO, FL 33777

Title: D (X) Change ( ) Addition  
Name: GORMAN, KATHY  
Address: 13675 SERENA DR  
City-St-Zip: LARGO, FL 33774

Title: T (X) Change ( ) Addition  
Name: METKA, RUTH  
Address: 13255 108TH AVE N  
City-St-Zip: LARGO, FL 33774

Title: T (X) Change ( ) Addition  
Name: VILARET, MICHELE  
Address: 11688 TRADEWINDS BLVD.  
City-St-Zip: LARGO, FL 33773

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHARINE J CALDWELL

D

01/05/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date