

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F00000001091

FILED
Aug 20, 2003
Secretary of State

Entity Name: WET 'N WILD INTERNATIONAL, INC.

Current Principal Place of Business:

ONE WEST ADAMS STREET
2 FLOOR
JACKSONVILLE, FL 32202

Current Mailing Address:

ONE WEST ADAMS STREET
2 FLOOR
JACKSONVILLE, FL 32202

New Principal Place of Business:

ONE WEST ADAMS STREET
1ST FLOOR
JACKSONVILLE, FL 32202

New Mailing Address:

ONE WEST ADAMS STREET
1ST FLOOR
JACKSONVILLE, FL 32202

FEI Number: 75-2424452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: GOLDMAN, NATHAN D
Address: ONE WEST ADAMS STREET, 2 FLOOR
City-St-Zip: JACKSONVILLE, FL 32202

Title: PD (X) Delete
Name: DREW, RANDAL H
Address: ONE WEST ADAMS STREET, 2 FLOOR
City-St-Zip: JACKSONVILLE, FL 32202

Title: VSD (X) Delete
Name: GRIGGS, GWEN H
Address: ONE WEST ADAMS STREET, 2 FLOOR
City-St-Zip: JACKSONVILLE, FL 32202

Title: VT (X) Delete
Name: BARKLEY, ANDY
Address: ONE WEST ADAMS STREET, 2 FLOOR
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: GOLDMAN, NATHAN D
Address: 1275 CREIGHTON BLUFF LANE
City-St-Zip: JACKSONVILLE, FL 32223

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NATHAN D. GOLDMAN

PSD

08/20/2003

Electronic Signature of Signing Officer or Director

Date