

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H74573

FILED  
Sep 05, 2006  
Secretary of State

Entity Name: ICE RECREATION, INC.

**Current Principal Place of Business:**

13940 ICOT BLVD  
CLEARWATER, FL 33760 US

**New Principal Place of Business:**

**Current Mailing Address:**

13940 ICOT BLVD  
CLEARWATER, FL 33760 US

**New Mailing Address:**

FEI Number: 59-2667775      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WASILEWSKI, RICHARD  
1520 CHATEAUWOOD DRIVE  
CLEARWATER, FL 33760 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: WASILEWSKI, RICHARD  
Address: 13940 ICOT BLVD  
City-St-Zip: CLEARWATER, FL 33760

Title: VPS ( ) Delete  
Name: WASILEWSKI, CAROL  
Address: 13940 ICOT BLVD  
City-St-Zip: CLEARWATER, FL 33760

Title: VP ( ) Delete  
Name: WASILEWSKI, JEFFREY  
Address: 13940 ICOT BLVD  
City-St-Zip: CLEARWATER, FL 33760

Title: VP ( ) Delete  
Name: MCCARTHY, NICOLE  
Address: 13940 ICOT BLVD  
City-St-Zip: CLEARWATER, FL 33760 US

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

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

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 Chapter 119, 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: RICHARD WASILEWSKI

PT

09/05/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date