2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000132039

City-St-Zip:

Entity Name: THE STILWELL SPLASH ZONE INC

FILED Feb 03, 2003 Secretary of State

Entity Nai	me: THE STILWELL SPLASH ZONE, IN	IC.		
Current P	rincipal Place of Business:	New Princ	New Principal Place of Business:	
	REA LANE, S.E. #105 ERS, FL 33912			
Current M	lailing Address:	New Maili	New Mailing Address:	
	REA LANE, S.E. #105 ERS, FL 33912			
FEI Number	: FEI Number Applied For (X) FEI Number Not Appl	icable () Certificate of Status Desired (X)	
Name and	Address of Current Registered Agen	t: Name and	Name and Address of New Registered Agent:	
1375 JACk	I, W. GUS II KSON STREET, SUITE 303 ERS, FL 33901			
	named entity submits this statement for e of Florida.	the purpose of changing i	ts registered office or registered agent, or both,	
SIGNATU	· · · · · · · · · · · · · · · · · · ·	d A want	Dete	
	Electronic Signature of Registered	a Agent	Date	
	mpaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete LONG, WILLIAM 2213 ANDREA LANE, S.E. #105 FORT MYERS, FL 33912	Title: Name: Address: City-St-Zip:	PRES (X) Change () Addition LONG, WILLIAM 2213 ANDREA LANE, S.E. #105 FORT MYERS, FL 33912	
Title: Name: Address: City-St-Zip:	()Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition HAYES, PETER A 2213 ANDREA LANE, S.E. #105 FORT MYERS, FL 33912	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	SEC () Change (X) Addition NEWBY-LONG, TRINA L 2213 ANDREA LANE, S.E. #105 FORT MYERS, FL 33912	
Title: Name: Address:	() Delete	Title: Name: Address:	TRES () Change (X) Addition NEWBY-LONG, TRINA L 2213 ANDREA LANE, S.E. #105	

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.

City-St-Zip:

FORT MYERS, FL 33912

SIGNATURE: WILLIAM LONG PRES 02/03/2003