

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000039243

FILED
Aug 01, 2007
Secretary of State

Entity Name: ADVENTURES UNDER THE SEA, INC.

Current Principal Place of Business:

4218 HENDERSON BLVD.
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

4218 HENDERSON BLVD.
TAMPA, FL 33629

New Mailing Address:

FEI Number: 32-0070491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUBLEY & BUBLEY, P.A.
3820 NORTHDALÉ BOULEVARD
SUITE 312B
TAMPA, FL 33624 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: D () Delete
Name: HARRIS, BEN
Address: 408 CLOVER LEAF DR
City-St-Zip: LITHIA, FL 33547

Title: D () Delete
Name: HARRIS, TINA
Address: 408 CLOVERLEAF DR
City-St-Zip: LITHIA, FL 33547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: BENJAMIN T HARRIS

PRES

08/01/2007

Electronic Signature of Signing Officer or Director

_____ Date