2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#752888

FILED Mar 10, 2006 Secretary of State

Entity Name: WEST FLORIDA LIGHTNING AQUATICS, INC.

Current Principal Place of Business: New Principal Place of Business: 13120 VONN ROAD LARGO, FL 33774 **Current Mailing Address: New Mailing Address:** P.O. BOX 1144 INDIAN ROCKS BEACH, FL 337851144 FEI Number: 59-6582968 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CALDWELL, KATHARINE J 106556 INDÍAN HILLS COURT LARGO, FL 33777 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CALDWELL, KATHARINE J Name: Name: Address: 106556 INDIAN HILLS COURT Address: City-St-Zip: LARGO, FL 33777 City-St-Zip: Title: () Delete Title: D (X) Change () Addition Name: GORMAN, KATHY Name: SCOTT, ANN Address: 13675 SERENA DR Address: 8353 BAYSHORE DR. City-St-Zip: LARGO, FL 33774 City-St-Zip: TREASURE ISLAND, FL 33707 Title: () Delete Title: (X) Change () Addition METKA, RUTH BOUCHER, BECKY Name: Name: 6388 93RD TERRACE N. #4601 Address: 13255 108TH AVE N Address: City-St-Zip: LARGO, FL 33774 City-St-Zip: PINELLAS PARK, FL 33782 Title: () Delete Title: (X) Change () Addition Name: MOSES, TRICIA Name: MOSES, TRICIA Address: 12432 HENRIETTA AVE. Address: 12432 HENRIETTA AVE. City-St-Zip: LARGO, FL 33773 City-St-Zip: LARGO, FL 33774

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

SIGNATURE: TRICIA MOSES T 03/10/2006