

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008541

FILED
Apr 27, 2012
Secretary of State

Entity Name: BABY OTTER ANDRE' DAWSON AQUATIC CENTER, INC.

Current Principal Place of Business:

8930 STATE ROAD 84
#285
DAVIE, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

8930 STATE ROAD 84
#285
DAVIE, FL 33324 US

New Mailing Address:

FEI Number: 42-1610189 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MARLENE, BLOOM
8930 STATE ROAD 84
#285
DAVIE, FL 33324 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

OFFICERS AND DIRECTORS:

Title: PTD
Name: BLOOM, MARLENE R
Address: 8930 STATE ROAD 84, #285
City-St-Zip: DAVIE, FL 33324 US

Title: D
Name: DAWSON, ANDRE' D
Address: 10601 S.W. 74 AVENUE
City-St-Zip: MIAMI, FL 33156 US

Title: D
Name: YORK, STACI F D
Address: 8930 STATE ROAD 84, #285
City-St-Zip: DAVIE, FL 33324 US

Title: D
Name: YORK, MINDY J D
Address: 8930 STATE ROAD 84
City-St-Zip: DAVIE, FL 33324

I hereby 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 all other like empowered.

SIGNATURE: MARLENE BLOOM

P

04/27/2012

Electronic Signature of Signing Officer or Director

Date