

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000010646

**FILED**  
**Jan 13, 2014**  
**Secretary of State**  
**CC4266583229**

**Entity Name:** WATER SPORTS FOUNDATION, INC.

**Current Principal Place of Business:**

4860 WATERWITCH POINT DR  
ORLANDO, FL 32806

**Current Mailing Address:**

4860 WATERWITCH POINT DR  
ORLANDO, FL 32806

**FEI Number:** 20-1947916

**Certificate of Status Desired:** No

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

MEDDOCK, LARRY JMR.  
4860 WATERWITCH POINT DR  
ORLANDO, FL 32806 US

*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

**Officer/Director Detail :**

Title D  
Name ARCHER, JOHN  
Address 433 PARK AVE SOUTH  
City-State-Zip: NEW LONDON OH 44851

Title D  
Name GARDNER, BRIAN  
Address 30200 SE 79TH #110  
City-State-Zip: ISSAQUAH WA 98027

Title VP  
Name CRUTCHFIELD, SCOTT  
Address 12521 MALLARD BAY DRIVE  
City-State-Zip: KNOXVILLE TN 37922

Title P  
Name EMMONS, JIM  
Address 1713 COTTONWOOD CREEK PLACE  
City-State-Zip: LAKE MARY FL 32746

Title D  
Name MEDDOCK, LARRY J  
Address 4860 WATERWITCH PT. DRIVE  
City-State-Zip: ORLANDO FL 32806

Title S  
Name MEDDOCK, JAN L  
Address 4860 WATERWITCH PT. DRIVE  
City-State-Zip: ORLANDO FL 32806

*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:** JAN L MEDDOCK

**S**

**01/13/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date