

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17352

**Entity Name:** WATER SPORTS INDUSTRY ASSOCIATION, INC.**Current Principal Place of Business:**2750 TAYLOR AVENUE  
SUITE A-18  
ORLANDO, FL 32806**Current Mailing Address:**PO BOX 568512  
ORLANDO, FL 32856-8512 US**FEI Number: 59-2766476****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MICHAEL, KEVIN L  
405 MACARTHUR DRIVE  
ORLANDO, FL 32839 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:** KEVIN L MICHAEL

02/09/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT	Title	OFFICE ADMINISTRATOR
Name	OSWELL, ROBERT	Name	HAWORTH, NAOMI R
Address	190 UTOPIA CIRCLE	Address	2705 COOLIDGE AVENUE
City-State-Zip:	NEW LONDON FL 32952	City-State-Zip:	ORLANDO FL 32804
Title	VP	Title	TREASURER
Name	VLAHOVICH, CJ	Name	WILSON, WAYNE
Address	7926 BRACKEN PLACE SE	Address	5075 KIMBERLY WAY
City-State-Zip:	SNOQUALMIE WA 98065	City-State-Zip:	LOUDON TN 37774
Title	SECRETARY	Title	EXECUTIVE DIRECTOR
Name	JAMES, VAUGHT	Name	MICHAEL, KEVIN L
Address	809 PORPOISE CT	Address	405 MACARTHUR DRIVE
City-State-Zip:	PANAMA CITY BEACH FL 32407	City-State-Zip:	ORLANDO FL 32839

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:** NAOMI HAWORTH

OFFICE ADMINISTRATOR 02/09/2021

Electronic Signature of Signing Officer/Director Detail

Date