

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N92000000454

**FILED**  
**Feb 16, 2016**  
**Secretary of State**  
**CC3154024031**

**Entity Name:** CLEARWATER AQUATIC TEAM, INC.

**Current Principal Place of Business:**

1501 N. BELCHER ROAD  
SUITE 229  
CLEARWATER, FL 33765

**Current Mailing Address:**

1501 N. BELCHER ROAD  
SUITE 229  
CLEARWATER, FL 33765 US

**FEI Number:** 59-3164776

**Certificate of Status Desired:** No

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

REESE, RANDOLPH H.  
1545 WILLOW BROOK DR.  
PALM HARBOR, FL 34683 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:** RANDOLPH H. REESE

02/16/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name REESE, RANDOLPH H.  
Address 1501 N. BELCHER RD., SUITE 229  
City-State-Zip: CLEARWATER FL 33765

Title SECRETARY  
Name BROWN, JARED  
Address 1501 N. BELCHER RD., SUITE 229  
City-State-Zip: CLEARWATER FL 33765

Title TREASURER  
Name DICKSON, KEITH  
Address 1501 N. BELCHER RD., SUITE 229  
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR  
Name ELIZABETH, PICKREM  
Address 1501 N. BELCHER ROAD, SUITE 229  
City-State-Zip: CLEARWATER FL 33765

Title PRESIDENT/DIRECTOR  
Name DOEL, KEVIN  
Address 1501 N. BELCHER ROAD  
SUITE 229  
City-State-Zip: CLEARWATER FL 33765

*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:** RANDOLPH H. REESE

**DIRECTOR**

02/16/2016

Electronic Signature of Signing Officer/Director Detail

Date