

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

DOCUMENT# N92000000454

**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:**

STEARNS, JAMES RESQ.  
1370 PINEHURST ROAD  
DUNEDIN, FL 34698 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 MR  
Name REESE, RANDOLPH HPRESIDE  
Address 1501 N. BELCHER RD., SUITE 229  
City-State-Zip: CLEARWATER FL 33765

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

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

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

Title MR.  
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

**PRESIDENT**

**02/21/2014**

Electronic Signature of Signing Officer/Director Detail

Date