

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000025048

Entity Name: AQUAFIBER TECHNOLOGIES CORPORATION**Current Principal Place of Business:**3251 ELM STREET
OVIEDO, FL 32765**Current Mailing Address:**PO BOX 4815
WINTER PARK, FL 32793-4815 US**FEI Number: 59-3647964****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**EDWARDS, RONALD L
660 BEACHLAND BLVD
SUITE 301
VERO BEACH, FL 32963-1708 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 DIRECTOR
Name BLAND, GEORGE T. JR.
Address PO BOX 4815
City-State-Zip: WINTER PARK FL 32793-4815

Title PRESIDENT, DIRECTOR
Name GREEN, KIRBY E III
Address PO BOX 4815
City-State-Zip: WINTER PARK FL 32793-4815

Title DIRECTOR
Name NUNIS, RICHARD A
Address PO BOX 4815
City-State-Zip: WINTER PARK FL 32793-4815

Title DIRECTOR
Name YOCHUM, THOMAS
Address PO BOX 4815
City-State-Zip: WINTER PARK FL 32793-4815

Title VTD
Name BURNETT, REBECCA T
Address PO BOX 4815
City-State-Zip: WINTER PARK FL 32793-4815

Title VP, SECRETARY, DIRECTOR
Name FAGAN, WILLIAM W
Address PO BOX 4815
City-State-Zip: WINTER PARK FL 32793-4815

Title DIRECTOR, VC
Name WRIGHT, KENNETH C
Address PO BOX 4815
City-State-Zip: WINTER PARK FL 32793-4815

Title DIRECTOR
Name MARDER, MICHAEL
Address PO BOX 4815
City-State-Zip: WINTER PARK FL 32793-4815

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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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: REBECCA T. BURNETTVP BUSINESS
OPERATIONS/TREASURE
R

04/24/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CHAIRMAN, CEO, DIRECTOR
Name EDWARDS, RONALD
Address PO BOX 4815
City-State-Zip: WINTER PARK FL 32793-4815

Title DIRECTOR
Name SOILEAU, MJ
Address PO BOX 4815
City-State-Zip: WINTER PARK FL 32793-4815

Title DIRECTOR
Name OLSON, MARY
Address PO BOX 4815
City-State-Zip: WINTER PARK FL 32793-4815