2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2015
Secretary of State
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Entity Name: THE BOAT SAFETY ACADEMY, LLC

Current Principal Place of Business:

1505 NW 33RD PLACE
C/O WILLIAM N. OLDS
CAPE CORAL, FL 33993

Current Mailing Address:

1505 NW 33RD PLACE
C/O WILLIAM N. OLDS
CAPE CORAL, FL 33933 US

FEI Number: 01-0922905

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OLDS, WILLIAM N
1505 NW 33RD PLACE
C/O WILLIAM N. OLDS
CAPE CORAL, FL 33933 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

Authorized Person(s) Detail :

Title	MGRM	Title	MGR
Name	OLDS, WILLIAM N	Name	OLDS, LISA M
Address	1505 NW 33RD PLACE C/O WILLIAM N. OLDS	Address	1505 NW 33RD PLACE C/O WILLIAM N. OLDS
City-State-Zip:	CAPE CORAL FL 33933	City-State-Zip:	CAPE CORAL FL 33933

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM N. OLDS MANAGER 01/12/2015

Electronic Signature of Signing Authorized Person(s) Detail — Date