

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 304071 (4)

1. Corporation Name

AQUATIC SERVICES INC



Principal Place of Business

Mailing Address

415 FLAMINGO DR.
DESTIN FL 32541

415 FLAMINGO DR.
DESTIN FL 32541

3. Date Incorporated or Qualified
04/15/1966

3a. Date of Last Report
06/28/1995

2. Principal Place of Business

2a. Mailing Address

21 415 Flamingo Dr.

26 415 Flamingo Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Destin FL

28 Destin FL

Zip

Zip

24 32541

29 32541

Country

Country

25 OKalosa

30 OKalosa

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DUNLAP, JOY H.
415 FLAMINGO DR.
DESTIN FL 32541

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Joy H. Dunlap

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME DUNLAP, JOY H.
STREET ADDRESS 415 FLAMINGO DR.
CITY-ST-ZIP DESTIN FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD
NAME DUNLAP, JACQUELINE
STREET ADDRESS 415 FLAMINGO DR.
CITY-ST-ZIP DESTIN FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

500001893695
-07/16/96--01002--048
***225.00

7-5-96 964 650 1886
837 8406

SIGNATURE:

Joy H. Dunlap

7-5-96 964 650 1886
837 8406

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