2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 23, 2006 08:00 AN **DOCUMENT # 507877** Secretary of State PELICAN SWIM N' PLAY, INC. Principal Place of Business Mailing Address 7040 DEL LAGO DR 7040 DEL LAGO DR SARASOTA, FL 34238 US SARASOTA, FL 34238 US 01122008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1687966 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WATERS, J. ALLEN DO NOT WRITE 7040 DEL LAGO DR SARASOTA, FL 34238 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATUFT cable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE PTD NAME WATERS, J. ALLEN 7040 DEL LAGO DR. STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238 SVD TITLE NAME WATERS, BRENDA S. 1100000395036 STREET ADDRESS 7040 DEL LAGO DR. U1/26/06-80034-014 ISOLON CITY-ST-ZIP SARASOTA, FL 34238 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP