

2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Nov 30, 2012
Secretary of State**

DOCUMENT# 581230

Entity Name: AQUATIC HABITATS, INC.

Current Principal Place of Business:

2395 APOPKA BLVD.
APOPKA, FL 32703 US

New Principal Place of Business:

Current Mailing Address:

2395 APOPKA BLVD.
APOPKA, FL 32703 US

New Mailing Address:

FEI Number: 59-1907012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHILDRESS, TODD
2395 APOPKA BLVD.
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

CT CORPORATION SYSTEMS
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: BARBARA A. BURKE, SPECIAL ASST. SECRETARY 11/30/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: FRYKMAN, KARL R
Address: 1620 HAWKINS AVENUE
City-St-Zip: SANFORD, NC 27330 US

Title: DS
Name: LAGESON, ANGELA D
Address: 1620 HAWKINS AVENUE
City-St-Zip: SANFORD, NC 27330 US

Title: T
Name: MEYER, MICHAEL G
Address: 1620 HAWKINS AVENUE
City-St-Zip: SANFORD, NC 27330 US

Title: VP
Name: MILLER, ROBERT D
Address: 1620 HAWKINS AVENUE
City-St-Zip: SANFORD, NC 27330 US

Title: D
Name: SCHROCK, MICHAEL V
Address: 1620 HAWKINS AVENUE
City-St-Zip: SANFORD, NC 27330 US

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: ROBERT D. MILLER VP 11/30/2012
Electronic Signature of Signing Officer or Director Date