

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 742026

1. Entity Name

ST. PETERSBURG AQUATICS, INC.

Principal Place of Business

901 N. SHORE DR. NE
PO BOX 510
ST PETERSBURG FL 33731-0510

Mailing Address

901 N. SHORE DR. NE
PO BOX 510
ST PETERSBURG FL 33731-0510

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-9824138

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NARDOZZI, PATRICIA
6346-27TH AVENUE NORTH
ST PETERSBURG FL 33710

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME NARDOZZI, PATRICIA
STREET ADDRESS 6346-27TH AVE NORTH
CITY-ST-ZIP ST PETERSBURG FL ☐ Delete

TITLE T
NAME ROUISSE, JOHN
STREET ADDRESS 6265 27TH AVE NO.
CITY-ST-ZIP ST. PETERSBURG FL ☐ Delete

TITLE D
NAME DIANNE O'BRIEN
STREET ADDRESS 6100-51ST STREET SOUTH
CITY-ST-ZIP ST. PETERSBURG FL ☐ Delete

TITLE D
NAME SUZANNE SANCHEZ
STREET ADDRESS 1808 BAYOU GRANDE BLVD, NE
CITY-ST-ZIP ST PETERSBURG FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SECRETARY
NAME DEBRA LANGENHAN
STREET ADDRESS 1131 - 49TH AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG, FL 33703 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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:

Patricia J. Nardozzi PATRICIA J. NARDOZZI / 5/01

(727) 343-5960

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0062589

CR2E037 (10/00)

FILED
Jan 20, 2001 8:00 am
Secretary of State

01-20-2001 90082 004 ****70.00

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DO NOT WRITE IN THIS SPACE