NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State
04-02-2002 90146 037 ****70.00

DOCUMENT # 742026

1. Entity Name
ST. PETERSBURG AQUATICS, INC.

DO NOT WRITE IN THIS SPACE

B00057264

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
901 N. SHORE DR. NE	P.O. BOX 510
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ST. PETERSBURG, FL	City & State: ST. PETERSBURG, FL
Zip: 33701 Country: USA	Zip: 33731 Country: USA

4. FEI Number: 59-9024138 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: PATRICIA NARDOZZI

Street Address (P.O. Box Number is Not Acceptable): 6346-27TH AVENUE NORTH

City: ST. PETERSBURG FL Zip Code: 33710

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

FEE IS $61.25
Initial or Amended UBR

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: PRESIDENT NAME: PATRICIA NARDOZZI STREET ADDRESS: 6346-27TH AVENUE NORTH CITY-ST-ZIP: ST. PETERSBURG, FL 33710	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: VICE-PRESIDENT NAME: VERONICA KING STREET ADDRESS: 7872 SUNDOWN DRIVE CITY-ST-ZIP: ST. PETERSBURG, FL 33709	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: TREASURER NAME: JOHN ROUSSE STREET ADDRESS: 6265-27TH AVENUE NORTH CITY-ST-ZIP: ST. PETERSBURG, FL 33710	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: DO NOT WRITE
TITLE: STEPHANIE CHAMBERS ↓ NAME: DIRECTOR STREET ADDRESS: 356 BELLEAIR DRIVE CITY-ST-ZIP: ST. PETERSBURG, FL 33704	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: IN THIS SPACE
TITLE: DIRECTOR NAME: GAIL NEWFIELD STREET ADDRESS: 4226 HOLLAND DRIVE CITY-ST-ZIP: ST. PETE BEACH, FL 33706	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: DIRECTOR NAME: RHONDA ROMANO STREET ADDRESS: 5313-18TH STREET NE CITY-ST-ZIP: ST. PETERSBURG, FL 33703	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:

CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Patricia J Nardozzi PATRICIA J. NARDOZZI PRESIDENT 3/20/02 727-343-5960
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #