

742026

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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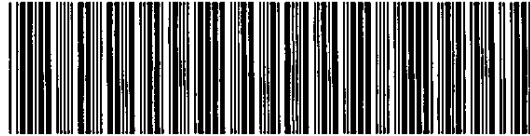
(Business Entity Name)

(Document Number)

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AUG 01 2016

C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: St Petersburg Aquatics, Inc
Name of Corporation

DOCUMENT NUMBER: 742026

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kevin Mooren

Name of Contact Person

St Petersburg Aquatics, Inc

Firm/Company

901 N Shore Dr NE

Address

St Petersburg, FL 33701

City/State and Zip Code

pnardozzi@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin Mooren

Name of Contact Person

at (727) 525-7774

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: St Petersburg Aquatics, Inc
2. The principal office address: 901 N Shore Dr NE
St Petersburg, FL 33701
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/16/1978 Document number: 742026
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Tracy Harris

901 N Shore Dr NE

St Petersburg, FL 33701

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Patricia Nardozzi

901 N Shore Dr NE

P.O. Box NOT acceptable

St Petersburg, FL 33703

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Kevin Moore
Signature of an officer or director

Kevin Moore Treasurer
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Patricia J. Nardozzi
Signature of Registered Agent

07/20/2016

Date

If signing on behalf of an entity:

PATRICIA J. NARDOZZI
Typed or Printed Name

*** FILING FEE: \$35.00 ***

FILED
2016 JUL 22 AM 12:00
CLERK OF STATE
TALLAHASSEE, FL 32303