

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Nov 09, 2012
Secretary of State**

DOCUMENT# 760494

Entity Name: CLEARWATER AQUATICS BOOSTERS, INC.**Current Principal Place of Business:**423 BUTTONWOOD LNAE
LARGO, FL 33770 US**New Principal Place of Business:**2257 JAFFA PLACE
CLEARWATER, FL 33764 US**Current Mailing Address:**423 BUTTONWOOD LNAE
LARGO, FL 33770 US**New Mailing Address:**2257 JAFFA PLACE
CLEARWATER, FL 33764 US

FEI Number: 59-2169574

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:DOYLE, DONNA A
423 BUTTONWOOD LANE
LARGO, FL 33770 US**Name and Address of New Registered Agent:**SILCOX, JOSEPH
2257 JAFFA PLACE
CLEARWATER, FL 33764 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: JOSEPH SILCOX

11/09/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P
Name: SILCOX, JOSEPH
Address: 2257 JAFFA PL
City-St-Zip: CLEARWATER, FL 33764Title: VP
Name: FREEMAN, NATE
Address: 1720 EAGLES NEST DRIVE
City-St-Zip: BELLEAIR, FL 33756Title: T
Name: RUSSELL, GABEL
Address: 305 N HILLCREST DRIVE
City-St-Zip: CLEARWATER, FL 33755Title: S
Name: MICHELLE, BRENNAN
Address: 414 5TH STREET SOUTH
City-St-Zip: SAFETY HARBOR, FL 34695

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RUSSELL GABEL

T

11/09/2012

Electronic Signature of Signing Officer or Director

Date