

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F39686

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: APPLIED AQUATIC MANAGEMENT, INC.

## Current Principal Place of Business:

4305 BOMBER RD  
BARTOW, FL 33830 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1469  
EAGLE LAKE, FL 33839 US

## New Mailing Address:

FEI Number: 59-2100923      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MYERS JR, PAUL C  
9481 WATERFORD OAKS DRIVE  
WINTER HAVEN, FL 33884 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: MYERS, PAUL, C J  
Address: 224 MCLEAN PT W  
City-St-Zip: WINTER HAVEN, FL 33884

Title: PSD ( ) Delete  
Name: MYERS, LINDA W,  
Address: 224 MCLEAN PT W  
City-St-Zip: WINTER HAVEN, FL 33884

Title: T ( ) Delete  
Name: JENNIFER, MYERS  
Address: 9481 WATERFORD OAKS DRIVE  
City-St-Zip: WINTER HAVEN, FL 33884

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: MYERS, PAUL, C J  
Address: 9481 WATERFORD OAKS DRIVE  
City-St-Zip: WINTER HAVEN, FL 33884

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CFO (X) Change ( ) Addition  
Name: JENNIFER, MYERS  
Address: 9481 WATERFORD OAKS DRIVE  
City-St-Zip: WINTER HAVEN, FL 33884

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JENNIFER L MYERS

CFO

01/15/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date