573448

(Re	questor's Name)					
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PICK-UP	WAIT	MAIL				
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Certified Copies	_ Certificates	of Status				
Special Instructions to	Filing Officer:					
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10/09/07--01041--022 **35.00



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: WATER SPORTS, INC (Name of Corporation)
DOCUMENT NUMBER: 573448
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:
DONAID A. PONSCH (Name of Contact Person)
WATER SPORTS, INC (Firm/Company)
2250 BROADWAY (Address)
RIVIERA BEACH, FL 33404 (City/State and Zip Code)
For further information concerning this matter, please call:
DONAD A. PONSCH at (561) 248.3500 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address: Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

statement of chan	ige is submitted j	tions 607.0502, 617. for a corporation org gistered office or reg	ganized under the	laws of the S	tate of			
1. The name of th	ne corporation:	WATER	SPORT.	5,100	<u>-</u>			
	office address:	2250 6	BROADW	AΥ				
.		RIVIERA	BEACH	1, FL	3340	<u> 24</u>		
3. The mailing ad	ldress (if differe	nt):					<u> </u>	
4. Date of incorpo	oration/qualifica	tion: 05/15/1	987 Docume	ent number:	573	3448	<u> </u>	
5. The name and Florida Departs		the current registere	ed agent and regist	tered office or	n file with th	ne		
		PERT, B	RUCE L	N. J	R			
	814	NORTHL	AKE E	3LVD				
		PAIM BE				SEC	9,	
6. The name and (if changed):	_	f the new registered SCH , $\mathcal{D}_{\mathcal{C}}$				AHASSEE AHA	OCT -9 A	FILE
	2250	P.O. BROA (P.O. Box NOT accep	DWAY table)			STATE	州 11: 25	•
The street address as changed will		red office and the st		 :		egistered	agent	t,
Such change was authorized by the	s authorized by e board, or the	resolution duly add corporation has bee			_			
(Signatur	re of an officer or dire	ector)	DONA	4DA. (Printed or typed	PONS C	1 - PA	205	
I hereby accept I further agree to of my duties, and document is bein corporation has	the appointmen o comply with to d I am familiar ng filed merely to been notified in	t as registered agen he provisions of all with and accept the to reflect a change to writing of this cha	t and agree to ac statutes relative i obligation of my in the registered o nge.	et in this capa to the proper position as r office address	city. and comple egistered a s, I hereby c	ete perfor gent. Or confirm ti	rmanc if th hat th	ce is e
2			<u></u>	10/1/0	7			
	nature of Registered	•		(Date	;)			
If signing on bel	nair or an entity	:	•					
	yped or Printed Name	2)						
		* * * FILINO	G FEE: \$35.00 *	* *				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)