

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2007 8:00 am
Secretary of State

05-03-2007 90048 035 ***150.00

DOCUMENT # M92255

1. Entity Name
FLORIDA AQUATICS OF AVON PARK, INC.



Principal Place of Business
STE. 302, 3000 LANGLEY AVENUE
PENSACOLA, FL 32503

Mailing Address
STE. 302, 3000 LANGLEY AVENUE
PENSACOLA, FL 32503

2. Principal Place of Business - No P.O. Box #
3008 Langley Avenue

3. Mailing Address
3008 Langley Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Pensacola, FL

City & State
Pensacola, FL

Zip
32504

Country
USA

Zip
32504

Country
USA

04232007 Chg-P CR2E034 (12/06)

4. FEI Number
59-2899777

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIMMONS, LONNIE L.
STE. 302, 3000 LANGLEY AVE.
PENSACOLA, FL 32504

7. Name and Address of New Registered Agent

Name
Lonnie L. Simmons
Street Address (P.O. Box Number is Not Acceptable)
3008 Langley Avenue

City Pensacola FL Zip Code 32504

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Lonnie L. Simmons

4/26/07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME BENNETT, WILLIAM Y.
STREET ADDRESS 3846 MENENDEZ DR.
CITY-ST-ZIP PENSACOLA, FL ☐ Delete

TITLE STD
NAME BROUGHTON, REBECCA
STREET ADDRESS 3846 MENENDEA DR.
CITY-ST-ZIP PENSACOLA, FL ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William Y. Bennett William Y. Bennett

4/26/07

(850) 438-2585

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #