

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000003820

1. Entity Name

DIAMOND WATER SKI SHOW TEAM, INC.

Principal Place of Business

Mailing Address

329 SEMINOLA BLVD.
CASSELBERRY FL 32707

329 SEMINOLA BLVD.
CASSELBERRY FL 32707

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3675779

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLAIS, ROBIN
329 SEMINOLA BLVD.
CASSELBERRY FL 32707

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

DI

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME BEYER, TWILA
STREET ADDRESS 6375 TOPSY TRAIL
CITY-ST-ZIP ST. CLOUD FL 34771 ☒ Delete

TITLE PD
NAME TENDA, MIKE
STREET ADDRESS 832 CAMARGO WAY, #307
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714 ☒ Change ☐ Addition

TITLE VD
NAME TENDA, MIKE
STREET ADDRESS 832 CAMARGO WAY, #307
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714 ☒ Delete

TITLE VD
NAME GLEN DONOHUE
STREET ADDRESS 3065 S. FRANKCREEK AVE
CITY-ST-ZIP ORLANDO, FL 32701 ☒ Change ☐ Addition

TITLE SD
NAME BLAIS-BORING, ROBIN
STREET ADDRESS 329 SEMINOLA BLVD.
CITY-ST-ZIP CASSELBERRY FL 32707 ☐ Delete

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

TITLE TD
NAME BEYER, RON
STREET ADDRESS 6375 TOPSY TRAIL
CITY-ST-ZIP SAINT CLOUD FL 34771 ☒ Delete

TITLE TD
NAME LAUREL GIBSON
STREET ADDRESS 701 PADGETT CT.
CITY-ST-ZIP ORLANDO, FL 32839 ☒ Change ☐ Addition

TITLE D
NAME BLAIS, PAUL
STREET ADDRESS 329 SEMINOLA BLVD. E
CITY-ST-ZIP CASSELBERRY FL 32707 ☐ Delete

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

TITLE D
NAME BRUNCO, DREW
STREET ADDRESS 44508 LIGHT HOUSE CIRCLE
CITY-ST-ZIP ORLANDO FL 32808 ☒ Delete

TITLE D
NAME DAVID GIBSON
STREET ADDRESS 701 PADGETT CT
CITY-ST-ZIP ORLANDO, FL 32839 ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/20/02 407-696-9844

FILED
Mar 31, 2002 8:00 am
Secretary of State

03-31-2002 90340 023 ****70.00



DO NOT WRITE IN THIS SPACE

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CR2E037 (9/01)