2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00624

FILED Apr 28, 2009 Secretary of State

Entity Name: AQUATIC BOOSTERS, INC.						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
MAGNET D FORT MYE	RS, FL 33919	US				
Current Ma	ailing Address	:	New Mailii	New Mailing Address:		
P.O. BOX 0 FORT MYE	7008 RS, FL 33919					
FEI Number:	59-2313365	FEI Number Applied For ()	FEI Number Not Appli	icable () Certif	icate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of New R	egistered Agent:	
KENNEDY, ROBERT 1691 N FLOSSMOOR RD FORT MYERS, FL 33919 US			9816 FOLE UNIT #106	KENNEDY, ROBERT 9816 FOLERA COVE POINT UNIT #106 FORT MYERS, FL 33908 US		
The above in the State	named entity su of Florida.	bmits this statement for the pu	rpose of changing it	ts registered office o	r registered agent, or both,	
SIGNATUR	E: ROBERT K	ENNEDY			04/28/2009	
	Electronic	Signature of Registered Ager	nt		Date	
OFFICERS	AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () C THOMAS, JACK E 16031 WATERLE FORT MYERS, FI	AF LANE	Title: Name: Address: City-St-Zip:	()Chang	e () Addition	
Title: Name: Address: City-St-Zip:	SEC () D BLACK, LARRY F 5320 HARBORAG FORT MYERS, FI	E DR	Title: Name: Address: City-St-Zip:	()Chang	e () Addition	
Title: Name: Address: City-St-Zip:	TRE () D WILSON, MATTH 5501 CHESIRE D FORT MYERS, FI	R #203	Title: Name: Address: City-St-Zip:	()Chang	e () Addition	
Title: Name: Address: City-St-Zip:	BMD () D ALVARADO, JUDI 11397 WATERFO FORT MYERS, FI	RD VILLAGE DR	Title: Name: Address: City-St-Zip:	()Chang	e () Addition	
Title: Name: Address: City-St-Zip:	()[elete	Title: Name: Address: City-St-Zip:	BMD () Chang PELLE, HANNA 8290 SUMMER AVE FORT MYERS, FL 339	e (X) Addition	

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

SIGNATURE: ROBERT KENNEDY VP 04/28/2009