

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002589

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: ENGLEWOOD AQUATIC CLUB, INC.

**Current Principal Place of Business:**

7359 LIGHTHOUSE STREET  
ENGLEWOOD, FL 34224

**New Principal Place of Business:**

**Current Mailing Address:**

7359 LIGHTHOUSE STREET  
ENGLEWOOD, FL 34224

**New Mailing Address:**

FEI Number: 14-1900554

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CLAUDE, CINDY  
7359 LIGHTHOUSE STREET  
ENGLEWOOD, FL 34224 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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BRANCACCIO, DAVID  
Address: 552 MADRID BLVD  
City-St-Zip: PUNTA GORDA, FL 33950

Title: D ( ) Delete  
Name: CAIN, JEFFREY  
Address: 7537 CARAMBOLA  
City-St-Zip: PUNTA GORDA, FL 33955

Title: D ( ) Delete  
Name: CLAUDE, CINDY  
Address: 7359 LIGHTHOUSE ST.  
City-St-Zip: ENGLEWOOD, FL 34224

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: BRANCACCIO, DAVID  
Address: 9930 SE ENGLISH AVE  
City-St-Zip: ARCADIA, FL 34266

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

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

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: CINDY CLAUDE

D

04/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date