2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 02, 2008
Secretary of State

DOCUMENT# N04000002589

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: 9930 SE ENGLISH AVE
City-St-Zip: ARCADIA, FL 34266

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

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: WHALEY, JR
Address: 8112 MEMORY LANE
City-St-Zip: ROTONDA WEST, FL 33947

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

Title: D ( ) Change (X) Addition
Name: MORROW, BRYNN
Address: 32 OAKLAND HILLS COURT
City-St-Zip: ROTONDA WEST, FL 33947

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 10/02/2008

Electronic Signature of Signing Officer or Director — Date