

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002949

FILED
Sep 06, 2006
Secretary of State

Entity Name: BEYOND THE WATER FOR KIDS FOUNDATION, INC.

Current Principal Place of Business:

5319 LAKE JESSAMINE DRIVE
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

5319 LAKE JESSAMINE DRIVE
ORLANDO, FL 32839

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SUTTON, KEVIN
5319 LAKE JESSAMINE DRIVE
ORLANDO, FL 32839 US

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: SUTTON, KEVIN
Address: 5319 LAKE JESSAMINE DRIVE
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: SUTTON, JOSEPH R
Address: 513 BAR DRIVE
City-St-Zip: KISSIMMEE, FL 34759

Title: D () Delete
Name: URIBE, MAYRA M
Address: 5319 LAKE JESSAMINE DRIVE
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: ADAMS, SHAWN
Address: 5524 ARNOLD PALMER DRIVE #1132
City-St-Zip: ORLANDO, FL 32811

Title: D () Delete
Name: RODRIGUEZ, GLADYS
Address: 5925 LAUREL OAK COURT
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: MAYRA M. URIBE

DIRE

09/06/2006

Electronic Signature of Signing Officer or Director

Date