

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005206

FILED
Apr 11, 2010
Secretary of State

Entity Name: BLUEWATER BARRACUDA SWIM TEAM, INC.

Current Principal Place of Business:

BLUEWATER/HURLBURT POOL
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

9 CAMBRIDGE AVE
FORT WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 27-0096004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEEK, HAROLD F JR
303 WASHINGTON AVENUE
VALPARAISO, FL 32580 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
Name: BROADERICK, KATHLEEN
Address: 1013 CROCKED CREEK COVE
City-St-Zip: NICEVILLE, FL 32578

Title: D
Name: MARKWARDT, CHRISTINE R
Address: 625 KILCULLEN DR
City-St-Zip: NICEVILLE, FL 32578

Title: D
Name: GRAY, LEON
Address: 546 MAPLE AVE
City-St-Zip: NICEVILLE, FL 32578

Title: D
Name: BRUECHNER, PAUL
Address: 4 SOUTH ANDALUSIA
City-St-Zip: MARY ESTHER, FL 32569

Title: D
Name: BRASETH, PAMELA K
Address: 9 CAMBRIDGE AVE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D
Name: BRECHLER, LOUANN
Address: 112 RAMONDE CT
City-St-Zip: NICEVILLE, FL 32579

I hereby 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 all other like empowered.

SIGNATURE: PAMELA K BRASETH

D

04/11/2010

Electronic Signature of Signing Officer or Director

Date