

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007816

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** SOUTHWEST FLORIDA AQUATICS FOUNDATION, INC.

**Current Principal Place of Business:**

2918 LONE PINE LANE  
NAPLES, FL 34119

**New Principal Place of Business:**

**Current Mailing Address:**

2918 LONE PINE LANE  
NAPLES, FL 34119

**New Mailing Address:**

**FEI Number:** 20-3310264      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **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:**

TUCKER, BETTY LOU  
4151 GULF SHORE BLVD #405  
NAPLES, FL 34103 US

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

SUZANNE, SUZANNE  
2918 LONE PINE LANE  
NAPLES, FL 34119 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: SUZANNE SLAGHT

05/01/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SLAGHT, CHARLES  
Address: 2918 LONE PINE LANE  
City-St-Zip: NAPLES, FL 34119

Title: D ( ) Delete  
Name: SLAGHT, SUZANNE  
Address: 2918 LONE PINE LANE  
City-St-Zip: NAPLES, FL 34119

Title: D ( ) Delete  
Name: WEIDAMANN, KARL  
Address: 4151 GULF SHORE BLVD #604  
City-St-Zip: NAPLES, FL 34103

Title: D (X) Delete  
Name: MACDONALD, ROBERT  
Address: 511 LAKE LOUISE CIRCLE  
City-St-Zip: NAPLES, FL 34110

Title: D (X) Delete  
Name: STOLLMEYER, MICHAEL  
Address: 4255 GULF SHORE BLVD., #803  
City-St-Zip: NAPLES, FL 34103

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

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

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

Title: D (X) Change ( ) Addition  
Name: SLAGHT, ERIN J  
Address: 2918 LONE PINE LANE  
City-St-Zip: NAPLES, FL 34119

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: CHARLES C SLAGHT

CEO

05/01/2008

Electronic Signature of Signing Officer or Director

Date