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2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

Jan 23, 2002 8:00 am 3 Secretary of State **DOCUMENT # N13995** 1. Entity Name RUNNING WATER CLUB INC. 01-23-2002 90070 037 ****61.25 Principal Place of Business Mailing Address 37632 SKYLER ST. 37632 SKYLER ST. ZEPHYRHILLS FL 33541 ZEPHYRHILLS FL 33541 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3214148 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Robert-CostLey Street Address (P.O. Box Number is Not Acceptable) ROGERS, GORDON 37632 SKYLER ST. 37638 Wallington ZEPHYRHILLS FL 33541 Zip Code 3354/ 8. 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 9. Election Campaign Financing \$5.00 May Be Make Check Payable to $^{\it G}$ FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD Costley, Robert 37638 Wallington TITLE ☐ Delete TITLE ☐ Addition NAME COSTLEY, ROBERT NAME STREET ADDRESS 37638 WALLINGTON STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ZEPHYRHILLS FL 33541 Zephyrhills, FL. 33541 TITLE PD ☐ Delete TITLE Change ☐ Addition VPGENE BAUER NAME ROGERS, GORDON NAME 37641 Frederick STREET ADDRESS 37632 SKYLER LANE STREET ADDRESS Zephyrhills, FL. 33541 CITY-ST-ZIP ZEPHYRHILLS FL 33541 CITY-ST-ZIP TITLE ☐ Delete TITLE 2D ☐ Change ☐ Addition Spencer Betty 37620 skyler Zephyrhills, FL. SPENCER, BETTY NAME NAME STREET ADDRESS 37620 SKYLER STREET STREET ADDRESS CITY-ST-ZIP ZEPHYRHILLS FL 33541 CITY-ST-ZIP Alchols, Alice 37608 SKYLER ☐ Delete TITLE (Change ☐ Addition EARNEST, BETTY NAME STREET ADDRESS 37648 DONALD DR. STREET ADDRESS Zephyrhills, FL. 33541 CITY-ST-7IP ZEPHYRHILLS FL 33541 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.