2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46337

Apr 16, 2004 Secretary of State

Entity Name: AQUATIC CLUB OF TEMPLE TERRACE, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O TEMPLE TERRACE RECREATION CENTER 6610 WHITEWAY DRIVE TEMPLE TERRACE, FL 33617 US

New Mailing Address: Current Mailing Address:

6610 WHITEWAY DRIVE TEMPLE TERRACE, FL 33617 US

FEI Number: 59-3094590 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOWER, HENRY 16010 WESTERHAM DR TAMPA, FL 33647

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

FIELDS, DIANE GARDIN, LESLIE Name: Name: 8002 DORADO COURT Address: 1216 TIMBER TRACE DRIVE Address:

City-St-Zip: TEMPLE TERRACE, FL 33637 City-St-Zip: WESLEY CHAPEL, FL 33543

Title: PD () Delete Title: () Change () Addition Name: HOWER, HENRY Name: Address: 16010 WESTERHAM DR Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

MENENDEL, MANNY A Name: MENENDEZ, MANNY A Name: Address: 3047 AERNAL COURT Address: 3047 AERNAL COURT City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: LAND O LAKES, FL 34639

Title: SD () Delete Title: SD (X) Change () Addition Name: ASRUSA, DIANE M Name: HARRISON, DENISE

6228 CRICKET HOLLOW DR 16602 PALM ROYAL DRIVE #1518 Address: Address:

City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: TAMPA, FL 33647

Title: () Delete Title: (X) Change () Addition COLENAN, JEANNE COLEMAN, JEANNE Name:

Name: 210 SUNNYSIDE RD 210 SUNNYSIDE RD Address: Address: City-St-Zip: TEMPLE TERRACE, FL 33617 City-St-Zip: TEMPLE TERRACE, FL 33617

I hereby certify that the information supplied with this filing does not qualify for the 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 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: HENRY HOWER PD 04/16/2004