

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000023456

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** SAFETY STARS SWIM SCHOOL, INC.

**Current Principal Place of Business:**

3395 HARBOR PLACE  
LARGO, FL 33770

**New Principal Place of Business:**

1047 9TH AVE NW  
LARGO, FL 33770

**Current Mailing Address:**

3395 HARBOR PLACE  
LARGO, FL 33770

**New Mailing Address:**

P.O.BOX 1842  
PALM HARBOR, FL 34682

**FEI Number:** 59-3696914

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GERVASI, LAURA  
3395 HARBOR PLACE  
LARGO, FL 33770 US

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

GERVASI, LAURA  
1047 9TH AVE NW  
LARGO, FL 33770 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:

04/30/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GERVASI, LAURA  
Address: 1047 9TH AVE NW  
City-St-Zip: LARGO, FL 33770

Title: VP  
Name: GERVASI, SASHA  
Address: 1047 9TH AVE NW  
City-St-Zip: LARGO, FL 33770

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAURA GERVASI

P

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date