


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2008 8:00 am
Secretary of State

03-05-2008 90027 002 ***150.00

DOCUMENT # P05000110843

1. Entity Name
AQUATIC INVESTMENTS OF PASCO, INC.



Principal Place of Business
**17641 DRAYTON ST.
 SPRING HILL, FL 34610**

Mailing Address
**17641 DRAYTON ST.
 SPRING HILL, FL 34610**

2. Principal Place of Business - No P.O. Box #
17641 DRAYTON ST

3. Mailing Address
17641 DRAYTON ST

Suite, Apt. #, etc.

01282008 Chg-P CR2E034 (12/06)



City & State
SPRING HILL FL

City & State
SPRING HILL FL

Zip
34610

Country
USA

Zip
34610

Country
USA

4. FEI Number
20-3202275

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**GRAHAM, SUSAN E
 17641 DRAYTON ST.
 SPRING HILL, FL 34610**

7. Name and Address of New Registered Agent
 Name **GRAHAM SUSAN E**
 Street Address (P.O. Box Number is Not Acceptable)
17641 DRAYTON ST
 City **SPRING HILL FL** Zip Code **34610**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Susan E Graham* **SUSAN E GRAHAM PRESIDENT** *Danny T Jetmore* **DANNY T JETMORE** **03-01-08**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS GRAHAM, SUSAN E 17641 DRAYTON ST. SPRING HILL, FL 34610 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D T JETMORE, DANNY T 17641 DRAYTON ST. SPRING HILL, FL 34610 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Susan E Graham* **SUSAN E GRAHAM** **03-01-08** **727 858 1947**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #