

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000035603

Entity Name: FLUID SKATE PARK, INC.

FILED
Mar 30, 2009
Secretary of State

Current Principal Place of Business:

3500 N.E. WALDO RD
GAINESVILLE, FL 326092513

New Principal Place of Business:

3500 N.E. WALDO RD,#B
GAINESVILLE, FL 326092513

Current Mailing Address:

3500 N.E. WALDO RD
GAINESVILLE, FL 326092513

New Mailing Address:

3500 N.E. WALDO RD,#B
GAINESVILLE, FL 326092513

FEI Number: 26-1294837

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAJAL, PHIL
818 W. UNIVERSITY AVE
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

HAJAL, PHIL
1904 NW 36TH DR
GAINESVILLE, FL 32605 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:

03/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, D () Delete
Name: HAJAL, PHIL
Address: 818 W. UNIVERSITY AVENUE
City-St-Zip: GAINESVILLE, FL 32601

Title: VP () Delete
Name: NEWMAN, JOSHUA N
Address: 4641 SW 85TH DRIVE
City-St-Zip: GAINESVILLE, FL 32608

Title: S, T () Delete
Name: NEWMAN, JOSHUA N
Address: 4641 SW 85TH DRIVE
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: NEWMAN, JOSHUA N
Address: 4641 SW 85TH DRIVE
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D (X) Change () Addition
Name: HAJAL, PHIL
Address: 1904 NW 36TH DR
City-St-Zip: GAINESVILLE, FL 32605

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

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

SIGNATURE: PHIL HAJAL

PRES

03/30/2009

Electronic Signature of Signing Officer or Director

Date