

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000055505

FILED
May 01, 2008
Secretary of State

Entity Name: FASTWATER CATAMARAN CHARTER, INC.

Current Principal Place of Business:

7712 CARRIAGE HOMES DR
10
ORLANDO, FL 32835

New Principal Place of Business:

6933 PIAZZA CT
ORLANDO, FL 32819

Current Mailing Address:

7712 CARRIAGE HOMES DR
10
ORLANDO, FL 32835

New Mailing Address:

6933 PIAZZA CT
ORLANDO, FL 32819

FEI Number: 26-0141933

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ONIK, GARY M
7712 CARRIAGE HOMES DR
10
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

ONIK, GARY M
6933 PIAZZA CT
ORLANDO, FL 32819 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: DR GARY M ONIK

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ONIK, GARY M
Address: 7712 CARRIAGE HOMES DR #10
City-St-Zip: ORLANDO, FL 32835

Title: VP () Delete
Name: ONIK, JANET K
Address: 15120 PALOMINO VALLEY PLACE
City-St-Zip: SAN DIEGO, CA 92127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ONIK, GARY M
Address: 6933 PIAZZA CT
City-St-Zip: ORLANDO, FL 32819

Title: VP (X) Change () Addition
Name: ONIK, JANET K
Address: 10135 CARRINGTON CT
City-St-Zip: ORLANDO, FL 32835

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: DR GARY M ONIK

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date