

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000067886

FILED  
Mar 12, 2009  
Secretary of State

Entity Name: AQUATIC ADVENTURES POOLS & SPA, INC.

**Current Principal Place of Business:**

3908 54TH AVENUE N.  
ST. PETERSBURG, FL 33714

**New Principal Place of Business:**

**Current Mailing Address:**

3908 54TH AVENUE N.  
ST. PETERSBURG, FL 33714

**New Mailing Address:**

FEI Number: 27-3030075

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REBELO, MANUEL  
5666 102ND AVENUE N.  
PINELLAS PARK, FL 33782 US

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

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: REBELO, MANUEL  
Address: 5666 102ND AVENUE N  
City-St-Zip: PINELLAS PARK, FL 33782

Title: VP ( ) Delete  
Name: HERRMANN, EDWARD  
Address: 11161 111TH PLACE N.  
City-St-Zip: LARGO, FL 33778

Title: P ( ) Delete  
Name: PEDRICK, MICHAEL  
Address: 280 JULIA CIRCLE NORTH  
City-St-Zip: ST. PETE BEACH, FL 33706

Title: S ( ) Delete  
Name: MORAN, KATHLEEN  
Address: 1910 VILLA ROSA DRIVE  
City-St-Zip: HOLIDAY, FL 34690

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: MANUEL REBELO

TEAS

03/12/2009

Electronic Signature of Signing Officer or Director

Date