

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P94000029848

1. Entity Name  
BETSY'S AQUATIC EDUCATIONAL CENTER, INC.



Principal Place of Business  
13529 47TH CT N  
ROYAL PALM BEACH, FL 33411

Mailing Address  
13529 47TH CT N  
ROYAL PALM BEACH, FL 33411

**FILED**  
**Jan 17, 2008 08:00 AM**  
**Secretary of State**



01142008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0486502</b>	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

RAPER, MARY G  
13529 47TH CT N  
ROYAL PALM BEACH, FL 33411

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when remitting)

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

TITLE DPS  
NAME RAPER, MARY G  
STREET ADDRESS 13529 47TH CT N  
CITY-ST-ZIP ROYAL PALM BEACH, FL 33411

TITLE D  
NAME RAPER, WILLIAM G  
STREET ADDRESS 13529 47TH CT N  
CITY-ST-ZIP ROYAL PALM BEACH, FL 33411

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: *Mary G. Raper*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-14-08 (561) 793-5474

Date

Daytime Phone #

UD00000787924  
01/18/08-80019-011 150.00

**DO NOT WRITE  
IN THIS SPACE**