2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000071851

Entity Name: AQUATIC SPORTS TRAINING, INC.

Apr 25, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2400 HOFFNER AVE 875 HYDE PARKE BLVD ORLANDO, FL 32809 US

#304

LAKELAND, FL 33805

Current Mailing Address: New Mailing Address:

875 HYDE PARKE BLVD 6337 NIGHTWIND CIRCLE ORLANDO, FL 32818

#304

LAKELAND, FL 33805 US

FEI Number: 59-3399439 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HUMPHRIES, J G 300 S ORANGE AVE STE 1000 ORLANDO, FL 32801 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:

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition () Delete Title: DPST

Name: ST. JOHN, LISA Name: ST. JOHN, LISA

6337 NIGHTWIND CIRCLE Address: HYDE PARKE BLVD #304 Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: LAKELAND, FL 33805 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LISA ST. JOHN **DPST** 04/25/2002