


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2007 08:00 A
Secretary of State

DOCUMENT # P96000082023 1. Entity Name WATERWORLD ACTIVITIES, INC.	
---	---

Principal Place of Business 1000 OMNI BLVD NEWPORT NEWS, VA 23606	Mailing Address 1000 OMNI BLVD NEWPORT NEWS, VA 23606
---	---

DO NOT WRITE IN THIS SPACE



04202007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0726350	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MACLAREN, LINDA O
798 S FEDERAL HWY
BOCA RATON, FL 33429

**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 reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MP ECONOMOS, NICHOLAS 4000 N FEDERAL HWY STE 206 BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GPD DIAMONSTEIN, ARTHUR 1086 ALGONQUIN ROAD NORFOLK, VA 23505
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GP COMESS, BARRY 10823 WEATHERVANE RD RICHMOND, VA 23233
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FP COMESS, ALLAN 401 ATLANTIC AVE APT 1206 VIRGINIA BEACH, VA 23451
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000733393
05/09/07-80084-015 150.00

**DO NOT WRITE
IN THIS SPACE**

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:  **NICK ECONOMOS** 04/25/2007 (757) 591-3519
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #