2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2018
Secretary of State
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Entity Name: ST. PETERSBURG AQUATICS, INC.

Current Principal Place of Business:

901 NORTH SHORE DR. NE
SAINT PETERSBURG, FL 33701

Current Mailing Address:

901 NORTH SHORE DR. NE
SAINT PETERSBURG, FL 33701 US

FEI Number: 59-1842389

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NARDOZZI, PATTY
901 N SHORE DR NE
SAINT PETERSBURG, FL 33703 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

Officer/Director Detail :

Title	PRESIDENT
Name	WILLIAMS, TORA L
Address	901 NORTH SHORE DR. NE
City-State-Zip:	SAINT PETERSBURG FL 33701

Title	SECRETARY
Name	EMERSON, JILL
Address	901 NORTH SHORE DR. NE
City-State-Zip:	SAINT PETERSBURG FL 33701

Title	DIRECTOR
Name	FINKE, E JOSEPH
Address	901 NORTH SHORE DR. NE
City-State-Zip:	SAINT PETERSBURG FL 33701

Title	VICE PRESIDENT
Name	MARLIN, MYRON
Address	901 NORTH SHORE DR. NE
City-State-Zip:	SAINT PETERSBURG FL 33701

Title	DIRECTOR
Name	NARDOZZI, PATTY
Address	901 NORTH SHORE DR. NE
City-State-Zip:	SAINT PETERSBURG FL 33701

Title	TREASURE
Name	MOOREN, KEVIN
Address	901 NORTH SHORE DR. NE
City-State-Zip:	SAINT PETERSBURG FL 33701

Title	HEAD COACH
Name	LEWIS, FRED
Address	901 NORTH SHORE DR. NE
City-State-Zip:	SAINT PETERSBURG FL 33701

Title	DIRECTOR
Name	GRANT, TRACY
Address	901 NORTH SHORE DR. NE
City-State-Zip:	SAINT PETERSBURG FL 33701

Continues on page 2

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATTY NARDOZZI DIRECTOR 01/11/2018

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	KAZEROUNIAN, ALLISON
Address	901 NORTH SHORE DR. NE
City-State-Zip:	SAINT PETERSBURG FL 33701

Title	DIRECTOR
Name	KURTZ, PAUL
Address	901 NORTH SHORE DR. NE
City-State-Zip:	SAINT PETERSBURG FL 33701

Title	DIRECTOR
Name	BROCKMAN, VINCENT
Address	901 NORTH SHORE DR. NE
City-State-Zip:	SAINT PETERSBURG FL 33701