

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001062

Entity Name: BLUEWATER MARITIME SCHOOL, INC.**Current Principal Place of Business:**6814 N. MAIN ST.
JACKSONVILLE, FL 32208**Current Mailing Address:**4002 ALDINGTON DR.
JACKSONVILLE, FL 32210 US**FEI Number: 59-3699176****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ANDERSON, TINA M
4002 ALDINGTON DR..
JACKSONVILLE, FL 32210 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	D
Name	ANDERSON, TINA M
Address	6814 N. MAIN ST.
City-State-Zip:	JACKSONVILLE FL 32208

Title	VC
Name	WHITAKER, JOSEPH
Address	6814 N. MAIN ST.
City-State-Zip:	JACKSONVILLE FL 32208

Title	VP
Name	BENNETT, JORDAN D
Address	3378 WESTFIELD DR.
City-State-Zip:	GREEN COVE SPRINGS FL 32043

Title	EXECUTIVE SECRETARY
Name	ANDERSON, TINA M
Address	4002 ALDINGTON DR.
City-State-Zip:	JACKSONVILLE FL 32210

Title	CFO
Name	ANDERSON, TINA M
Address	4002 ALDINGTON DR.
City-State-Zip:	JACKSONVILLE FL 32210

Title	OFFICER
Name	SHERWOOD, KENNETH
Address	6814 N. MAIN ST.
City-State-Zip:	JACKSONVILLE FL 32208

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: TINA ANDERSON**DIRECTOR****04/14/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date