

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000136099

**Entity Name:** STUDIO AQUATICS, INC.**Current Principal Place of Business:**ONE LAKE MORTON DRIVE  
P.O. BOX 3  
LAKELAND, FL 33802-0003**Current Mailing Address:**P.O. BOX 3  
LAKELAND, FL 33802 US**FEI Number:** 20-0437924**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VREELAND, JOHN K  
ONE LAKE MORTON DRIVE  
LAKELAND, FL 33801 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 DP  
Name VREELAND, JOHN K  
Address 3918 CANYON LAKE POINT  
City-State-Zip: LAKELAND FL 33813Title D, TRASURER  
Name VREELAND, MARIE LOUISE  
Address 3918 CANYON LAKE POINT  
City-State-Zip: LAKELAND FL 33813Title DVP  
Name VREELAND, TODD J  
Address 928 WEDGEWOOD LANE  
City-State-Zip: LAKELAND FL 33813Title DVP  
Name VREELAND, J KYLE  
Address 2625 NEVEDA ROAD  
City-State-Zip: LAKELAND FL 33803Title SECRETARY  
Name VREELAND, CHRISTY D  
Address 928 WEDGEWOOD LANE  
City-State-Zip: LAKEALND FL 33813

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

**SIGNATURE:** JOHN K VREELAND

PRESIDENT

04/10/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date