

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000153539

Entity Name: AQUATIC SAFETY ASSOCIATES, INC.

Current Principal Place of Business:

26140 HICKORY BLVD
601
BONITA SPRINGS, FL 34134

Current Mailing Address:

P.O.BOX 2625
BONITA SPRINGS, FL 34133

FEI Number: 22-3254311

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUCENKO, LARISSA
26140 HICKORY BLVD SILVER SANDS
601
BONITA SPRINGS, FL 34134 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 P
Name LUCENKO, LEONARD K
Address P.O.BOX 2625
City-State-Zip: BONITA SPRINGS FL 34133

Title EV
Name LUCENKO, LARISSA
Address PO BOX 2625
City-State-Zip: BONITA SPRINGS FL 34133

Title ST
Name LUCENKO, LARISSA
Address P.O.BOX 2625
City-State-Zip: BONITA SPRINGS FL 34133

Title SECRETARY
Name LUCENKO, LARISSA
Address P.O.BOX 2625
City-State-Zip: BONITA SPRINGS FL 34133

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: LARISSA LUCENKO

PRESIDENT

04/11/2015

Electronic Signature of Signing Officer/Director Detail

Date