## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#713341**

FILED Mar 15, 2005 Secretary of State

Entity Name: COLLEGE SWIMMING COACHES ASSOCIATION OF AMERICA, INC.

Current Principal Place of Business: New Principal Place of Business:

8540 SALSIFA TERRACE

COLORADO SPRINGS, CO 80920 US

Current Mailing Address: New Mailing Address:

PO BOX 63285

COLORADO SPRINGS, CO 80962 US

FEI Number: 59-6145666 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOWELL, MARY 777 S. FEDERAL HWY #E201

POMPANO BEACH, FL 33062 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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition

 Title:
 PD
 ( ) Delete

 Name:
 POWERS, TIM

 Address:
 ATHLETICS/SWIM COACH

 City-St-Zip:
 PROVO, UT 84602

Title: STD () Delete

Name: MEGERLE, DONALD R
Address: ATHLETIC DEPT./TUFTS UNIVERSITY

City-St-Zip: MEDFORD, MA

 Title:
 ED
 ( ) Delete

 Name:
 BOETTNER, ROBERT

 Address:
 6415 ROCKY BLUFF #201

City-St-Zip: COLORADO SPRINGS, CO 80918

Title: ( ) Delete Name:

Address: City-St-Zip: Name: MORRIS, RICHARD

Name: MORRIS, RICHARD
Address: 1000 HOLY AVE
City-St-Zip: WINTER PARK, FL 32789

Title: SD (X) Change ( ) Addition

Name: MEGERLE, DONALD R
Address: 159 COLLEGE AVE
City-St-Zip: SOMERVILLE, MA 02144

Title: ED (X) Change ( ) Addition

Name: BOETTNER, ROBERT Address: 8540 SALSIFA TERRACE

City-St-Zip: COLORADO SPRINGS, CO 80920

Title: TD ( ) Change (X) Addition

Name: WENDER, MICKEY

Address: ATHLETIC DEPT - U WASHINGTON

City-St-Zip: SEATTLE, WA 98195

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT BOETTNER ED 03/15/2005