

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713341

FILED
Jan 06, 2011
Secretary of State

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

Current Principal Place of Business:

4107 ALLEQUIPPA ST.
PITTSBURGH, PA 15219 US

New Principal Place of Business:

Current Mailing Address:

4107 ALLEQUIPPA ST.
PITTSBURGH, PA 15219 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

BRUCE, WIGO
INTERNATIONAL SWIMMING HALL OF FAME
ONE HALL OF FAME DRIVE
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRES
Name: BERNARDINO, MARK
Address: PO BOX 400846- ALDERMAN & MASSIE RD
City-St-Zip: CHARLOTTESVILLE, VA 21218 US

Title: SECY
Name: SHINOFIELD, JOEL
Address: 330 ENFIELD ROAD
City-St-Zip: LEXINGTON, VA 22904 US

Title: TRSR
Name: KNOLES, CHUCK
Address: PO BOX 7436
City-St-Zip: PITTSBURGH, PA 15213 US

Title: DIR
Name: GROSETH, BOB
Address: 1640 MAPLE ST. #803
City-St-Zip: EVANSTON, IL 60201 US

Title: PREL
Name: SINOCKI, KIRK
Address: PO BOX 159
City-St-Zip: WINGATE, NC 28174 US

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: CHUCK KNOLES

TRSR

01/06/2011

Electronic Signature of Signing Officer or Director

Date