

National Spa and Pool Institute - Florida

Florida Pool & Spa Association 1718 Main Street, Suite 303 NATIONAL SPAR POOL STREET, Suite 30 SPAR POOL INSTITUTE

HORIDA Return Service Requested

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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1	Corporation Name)	(Document #)	· ,
2. (Corporation Name)		(Document#)	500:0:055543 559 -05/16/0201049003 *****35.00 *****35.00
3. (Corporation Name)		(Document #)	***************************************
4(0	Corporation Name)	(Document #)	
☐ Walk in ☐ Mail out	☐ Pick up time _ ☐ Will wait	Photocopy	Certified Sopy Status Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other		AMENDMENTS Amendment Resignation of R.A Change of Register Dissolution/Withda Merger	red Agent
OTHER FILINGS Annual Report Fictitious Name		REGISTRATION/QU Foreign Limited Partnershi Reinstatement Trademark Other	as our
CR2F031(7/97)			Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 22, 2002

NATIONAL SPA AND POOL INSTITUTE 1718 MAIN STREET, SUITE 303 SARASOTA, FL 34236-5826

SUBJECT: FLORIDA POOL AND SPA ASSOCIATION, INC.

Ref. Number: 718950

We have received your document for FLORIDA POOL AND SPA ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must also contain the address of the registered agent which must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Corporate Specialist

Letter Number: 602A00032950

CEIVED PARTS OF 11 42 SION OF CORPORATIONS

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State ofFlorida
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida
1. The name of the corporation: Florida Pool & Spa Association Inc.
,
2. The mailing address of the corporation: 1718 Man St Suite 303
Sarasota FL 34236
3. Date of incorporation/qualification: 8/5/1970 Document number: 718950
4. The name and address of the current registered agent and office:
Jan C. Bednerik
Sarasota FL 34236 SAR 6 F
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)
Robin R. Webber
1718 Main St Sule 303
Savasota FL 34236
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
(Signature of an officer, chairman or vice chairman of the board) (Date)
ANID K. OXLEY PRESIDENT (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
Robin R. Webber 5/14/02 (Signature of Registered Agent) (Date)
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314