

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718950

FILED
Mar 24, 2004
Secretary of State**Entity Name:** FLORIDA POOL AND SPA ASSOCIATION, INC.**Current Principal Place of Business:**1718 MAIN STREET
SUITE 303
SARASOTA, FL 34236 US**New Principal Place of Business:****Current Mailing Address:**1718 MAIN STREET
SUITE 303
SARASOTA, FL 34236**New Mailing Address:****FEI Number:** 59-1679812 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WEBBER, ROBIN R
1718 MAIN STREET, SUITE 303
SARASOTA, FL 34236 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:** SD () Delete
Name: DELAFIELD, EDWARD
Address: 3404 REYNOLDS RD
City-St-Zip: LAKE LAND, FL 33803**Title:** PPD () Delete
Name: OXLEY, DAVID
Address: 149 STEVENS AVE
City-St-Zip: OLDSMAR, FL 34677**Title:** PD () Delete
Name: HARSANYI, DOUG
Address: 9725 DEVONWOOD CT
City-St-Zip: FORT MYERS, FL 33912**Title:** TD () Delete
Name: EGGLEFIELD, SCOTT
Address: 903 W ALBEE RD
City-St-Zip: NOKOMIS, FL 34275**Title:** VD () Delete
Name: JOHNSON, DAN
Address: 4519 NORTHGATE COURT
City-St-Zip: SARASOTA, FL 34234**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** VD (X) Change () Addition
Name: DELAFIELD, EDWARD
Address: 3404 REYNOLDS RD
City-St-Zip: LAKE LAND, FL 33803**Title:** TD (X) Change () Addition
Name: MONTANARO, DOMINICK
Address: 195 DESOTO PKWY
City-St-Zip: SATELLITE BEACH, FL 32937**Title:** PPD (X) Change () Addition
Name: HARSANYI, DOUG
Address: 17050 ALICO COMMERCE COURT
City-St-Zip: FORT MYERS, FL 33912**Title:** SD (X) Change () Addition
Name: EGGLEFIELD, SCOTT
Address: PO BOX 1650
City-St-Zip: NOKOMIS, FL 34274**Title:** PD (X) Change () Addition
Name: JOHNSON, DAN
Address: 4519 NORTHGATE COURT
City-St-Zip: SARASOTA, FL 34234

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: DAN JOHNSON

PD

03/24/2004

Electronic Signature of Signing Officer or Director

Date