2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735161

FILED Feb 10, 2009 Secretary of State

Entity Name: GREATER TAMPA SWIMMING ASSOCIATION, INC.

Current Principal Place of Business:

UNIVERSITY OF TAMPA P.O. BOX 80F 401 W. KENNEDY BOULEVARD

TAMPA, FL 33606

Current Mailing Address: New Mailing Address:

UNIVERSITY OF TAMPA P.O. BOX 80F 401 W. KENNEDY BOULEVARD

TAMPA, FL 33606 FEI Number: 59-1031032 TAMPA, FL 33606

Certificate of Status Desired ()

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

FEI Number Applied For ()

BRENNAN, LOIS M BRENNAN, LOIS M 602 S NEWPORT AVE 602 S NEWPORT AVE TAMPA, FL 33606 TAMPA, FL 33606

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.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

SIGNATURE: LOIS M. BRENNAN

02/10/2009 Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

(X) Change () Addition

SD

BRENNAN, EDWARD J

602 S NEWPORT AVE.

TAMPA, FL 33606 US

BRENNAN, LOIS M

TAMPA, FL 33606 US

602 S NEWPORT AVENUE

New Principal Place of Business:

UNIVERSITY OF TAMPA BOX 80-F

US

401 W. KENNEDY BOULEVARD

UNIVERSITY OF TAMPA

401 W. KENNEDY BLVD.

TAMPA, FL 33606

FEI Number Not Applicable ()

() Delete BRENNAN, ED, Name: 602 S NEWPORT AVE. Address:

City-St-Zip: TAMPA, FL

Title: SD () Delete BRENNAN, LOIS, Name:

Address: 602 S NEWPORT AVENUE

City-St-Zip: TAMPA, FL

Title: () Delete KINER, JAMES Name:

311-A S. WESTLAND AVE Address: City-St-Zip: TAMPA, FL 33606

Title: (X) Change () Addition Name: KINER, JAMES

311-A S. WESTLAND AVE Address: City-St-Zip: TAMPA, FL 33606 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LOIS M. BRENNAN SD 02/10/2009

Electronic Signature of Signing Officer or Director

Date