

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754188

FILED
Mar 20, 2009
Secretary of State

Entity Name: THE GREATER PENSACOLA AQUATIC CLUB, INC.

Current Principal Place of Business:

1000 COLLEGE BLVD.
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

1000 COLLEGE BLVD.
P.O. BOX 30318
PENSACOLA, FL 32503

New Mailing Address:

P.O. BOX 30318
PENSACOLA, FL 32503

FEI Number: 59-2770638

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FUNK, MIKE
3497 EDINBURGH DR
PACE, FL 325714 US

Name and Address of New Registered Agent:

KRAUS, PHILIP A MR.
4640 REGENCY COURT
PENSACOLA, FL 32504 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: PHILIP A. KRAUS

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: STONE, JEFF
Address: 4716 FRANCISCO PLACE
City-St-Zip: PENSACOLA, FL 32504

Title: P () Delete
Name: FUNK, MIKE
Address: 3497 EDINBURGH DR
City-St-Zip: PACE, FL 32571

Title: T () Delete
Name: MCKINNEY, REX
Address: 74225 RUMMITCH LN
City-St-Zip: PENSACOLA, FL 32504

Title: S () Delete
Name: FOSTER, BRIDGETTE
Address: 5480 KEYSTONE RD
City-St-Zip: PENSACOLA, FL 32504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V.P. (X) Change () Addition
Name: STONE, JEFF MR.
Address: 4716 FRANCISCO PLACE
City-St-Zip: PENSACOLA, FL 32504

Title: PRES (X) Change () Addition
Name: BURCH, RAYMOND MR.
Address: 6682 RAVINE STREET
City-St-Zip: MILTON, FL 32570

Title: V.P. (X) Change () Addition
Name: MCKINNEY, REX MR.
Address: 74225 RUMMITCH LN
City-St-Zip: PENSACOLA, FL 32504

Title: H.C. (X) Change () Addition
Name: KRAUS, PHILIP A MR.
Address: 4640 REGENCY COURT
City-St-Zip: PENSACOLA, FL 32504

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: PHILIP A. KRAUS

H.C.

03/20/2009

Electronic Signature of Signing Officer or Director

Date