

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000085

FILED
Apr 27, 2004
Secretary of State**Entity Name:** OUTDOOR POWER EQUIPMENT TECHNICIANS ASSOCIATION OF AMERICA, INC.**Current Principal Place of Business:**4414 SWEETWATER DRIVE
TAMPA, FL 33615 US**New Principal Place of Business:****Current Mailing Address:**PO BOX7535
ST. PETERSBURG, FL 337347535 US**New Mailing Address:**4414 SWEETWATER DRIVE
TAMPA, FL 33615 US**FEI Number:****FEI Number Applied For (X)****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LUCHSINGER, WILLIAM
4414 SWEETWATER DRIVE
TAMPA, FL 33615 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: P () Delete
Name: LUCHSINGER, WILLIAM
Address: 4414 SWEETWATER DRIVE
City-St-Zip: TAMPA, FL 33615 US

Title: S () Delete
Name: CORDANO, CHRISTINE
Address: 3600 39TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33713 US

Title: T () Delete
Name: KULAAS, ERIC H
Address: 1111 13TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33705 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: STONER, RICHARD E
Address: 8991 TRIPLET ROAD
City-St-Zip: N. FORT MEYERS, FL 33917 US

Title: T (X) Change () Addition
Name: STONER, RICHARD E
Address: 8991 TRIPLET ROAD
City-St-Zip: N. FORT MEYERS, FL 33917 US

Title: VP () Change (X) Addition
Name: KOOPMAN, MIKE
Address: 11711 COLLIER'S RESERVE DR
City-St-Zip: NAPLES, FL 34110

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: WILLIAM LUCHSINGER

P

04/27/2004

Electronic Signature of Signing Officer or Director

Date