

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 16, 2009
Secretary of State**

DOCUMENT# N05000008196

Entity Name: FLORIDA SUNCOAST CHAPTER OF THE AMERICAN BACKFLOW PREVENTION ASSOCIATION, INCORPORATED

Current Principal Place of Business:

6730 142ND AVENUE N
LARGO, FL 33771

New Principal Place of Business:

Current Mailing Address:

6730 142ND AVENUE N
LARGO, FL 33771

New Mailing Address:

FEI Number: 20-1662886 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GOERGEN, KENNETH P
6730 142ND AVENUE N
LARGO, FL 33771 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: GOERGEN, KENNETH P
Address: 6730 142ND AVENUE N
City-St-Zip: LARGO, FL 33771

Title: V () Delete
Name: ANDERSON, BRADLEY J
Address: 6730 142ND AVE NORTH
City-St-Zip: LARGO, FL 33771

Title: S () Delete
Name: TADDIGS, LISA M
Address: 6730 142ND AVENUE N
City-St-Zip: LARGO, FL 33771

Title: T (X) Delete
Name: DANIELS, KATHLEEN
Address: 6730 142ND AVE N
City-St-Zip: LARGO, FL 33771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V,S (X) Change () Addition
Name: GOERGEN, KENNETH P
Address: 6730 142ND AVENUE N
City-St-Zip: LARGO, FL 33771

Title: P (X) Change () Addition
Name: ANDERSON, BRADLEY J
Address: 6730 142ND AVE NORTH
City-St-Zip: LARGO, FL 33771

Title: T (X) Change () Addition
Name: CAMPBELL, ROBERT L
Address: 6730 142ND AVENUE N
City-St-Zip: LARGO, FL 33771

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

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: ROBERT L CAMPBELL

T

07/16/2009

Electronic Signature of Signing Officer or Director

Date