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| (Cit | y/State/Zip/Phone | e #) | | |
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COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: Florida Swimming Pool Association - Northwest Florida Chapter, Inc (Name of Corporation) DOCUMENT NUMBER: N05000008829 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Robin Webber (Name of Contact Person) Florida Swimming Pool Association - Northwest Florida Chapter, Inc. (Firm/Company) 1718 Main Street, Suite 303 (Address) Sarasota, Florida 34236-5826 (City/State and Zip Code) For further information concerning this matter, please call: Robin Webber (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. **Mailing Address:** Street Address:

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha | provisions of sections 607.0502, 617.050. ange is submitted for a corporation organ er to change its registered office or registe | ized under the laws of the State of _ | | ris | _ . |
|---|---|---|------------|---------------------------|---------------------|
| | the corporation: Florida Swimming Pool A | | | | |
| | office address: 1718 Main Street, Suite 3 | | | | |
| 3. The mailing a | address (if different): | | | | |
| 4. Date of incorp | poration/qualification: 8/26/2005 | Document number: N0500000 | D8829 | | |
| | d street address of the current registered agreement of State: | gent and registered office on file with | the | | |
| | Nicholas J. Pasyanos | | | | |
| | 1718 Main Street, Suite 303 | <u></u> | Z E Si | 0 | |
| | Sarasota, Florida 34236-5826 | | UHA. | JUN | 71 |
| 6. The name and (if changed): | d street address of the new registered agen | t (if changed) and /or registered offic | (C) | -5 AM | 产而 |
| | Robin Webber | | 707 718 | ف | D |
| | 1718 Main Street, Suite 303 | | | J. | |
| | (P.O. Box NOT acceptable) | | | | |
| | Sarasota, Florida 34236-5826 | | | | |
| The street addre | ess of its registered office and the street a be identical. | address of the business office of its | registere | ed age | ent, |
| Such change was authorized by the | as authorized by resolution duly adopted ne board, or the corporation has been no | by its board of directors or by an of ified in writing of the change. | officer so |) | |
| Scotto (Signate | 19 of an officer or director) | Scott Egglefield, President (Printed or typed name and titl | <u>le)</u> | | _ |
| I hereby accept I further agree to of my duties, an document is bei corporation has | the appointment as registered agent and to comply with the provisions of all state of I am familiar with and accept the obling filed merely to reflect a change in the been notified in writing of this change. | · · · · · · · · · · · · · · · · · · · | , | forma Or, if 1 that | ince this the |
| Pahi. | & Webber | June 2, 2006 | | | |
| Sig | gnature of Registered Agent) | (Date) | | | _ |
| If signing on be | half of an entity: | | | | |
| (1 | yped or Printed Name) | | | | |
| | * * * FILING FE | E: \$35.00 * * * | | | |

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)