2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008829

Feb 14, 2007 Secretary of State

Entity Name: FLORIDA SWIMMING POOL ASSOCIATION - NORTHWEST FLORIDA CHAPTER, INC.

Current Principal Place of Business: New Principal Place of Business:

1718 MAIN STREET 2555 PORTER LAKE DRIVE

SUITE 106 SUITE 303

SARASOTA, FL 34236 US SARASOTA, FL 34240

New Mailing Address: **Current Mailing Address:**

2555 PORTER LAKE DRIVE 1718 MAIN STREET SUITE 303 SUITE 106

SARASOTA, FL 34236 US

SARASOTA, FL 34240 US

FEI Number: 20-3404274 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WEBBER, ROBIN WEBBER, ROBIN 2555 PORTER LAKE DR 1718 MAIN STREET SUITE 106 SUITE 303

SARASOTA, FL 342365826 US SARASOTA, FL 34240 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: 02/14/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition CRUMPLER, MACK CRUMPLER, MACK Name: Name:

153 4TH AVENUE, EAST Address: 153 4TH AVENUE, EAST Address: City-St-Zip: CRESTVIEW, FL 32539 US City-St-Zip: CRESTVIEW, FL 32539 US

Title: () Delete Title: (X) Change () Addition

SALVO, THEO Name: SALVO, THEO Name:

Address: 2591 CENTERVILLE ROAD, SUITE 201 Address: 2591 CENTERVILLE ROAD, SUITE 201

City-St-Zip: TALLAHASSEE, FL 32308 US City-St-Zip: TALLAHASSEE, FL 32308 US

Title: SEC () Delete Title: SD (X) Change () Addition SAMS, CHRIS SAMS, CHRIS Name: Name:

2075 ELAINE CIRCLE 2075 ELAINE CIRCLE Address: Address: City-St-Zip: PENSACOLA, FL 32503 US City-St-Zip: PENSACOLA, FL 32503 US

() Delete Title: **TRES** Title: TD (X) Change () Addition

Name: NORTON, ED Name: NORTON, ED Address: 4014 VALENCIA CT. Address: 4014 VALENCIA CT. City-St-Zip: PANAMA CITY, FL 32405 US City-St-Zip: PANAMA CITY, FL 32405 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MACK CRUMPLER PD 02/14/2007