

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008829

FILED
Apr 29, 2010
Secretary of State

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

Current Principal Place of Business:

153 4TH AVE E
CRESTVIEW, FL 32539 US

New Principal Place of Business:

Current Mailing Address:

153 4TH AVE E
CRESTVIEW, FL 32539 US

New Mailing Address:

FEI Number: 20-3404274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUMPLER, WALTER M
153 4TH AVE E
CRESTVIEW, FL 32539 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: PD
Name: CRUMPLER, WALTER M
Address: 153 4TH AVE E
City-St-Zip: CRESTVIEW, FL 32539 US

Title: VPD
Name: SALVO, JOHN T
Address: 2591 CENTERVILLE ROAD, SUITE 201
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: SD
Name: ESMOND, MIKE
Address: 8514 PENSACOLA BLVD
City-St-Zip: PENSACOLA, FL 32534 US

Title: TD
Name: THOMAS, MATT
Address: 8808 GROW DR
City-St-Zip: PENSACOLA, FL 32514 US

Title: DIR
Name: JENSON, THOMAS
Address: 8808 GROW DR
City-St-Zip: PENSACOLA, FL 32514

Title: DIR
Name: GUDGEL, BARBARA
Address: 123 BROCK
City-St-Zip: PANAMA CITY, FL 32405

I hereby 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 all other like empowered.

SIGNATURE: WALTER M CRUMPLER

PD

04/29/2010

Electronic Signature of Signing Officer or Director

Date