

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010150

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** INTERNATIONAL HOT TUB ASSOCIATION, INC.

**Current Principal Place of Business:**

2811 TAMIAMI TRAIL  
SUITE P  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

**Current Mailing Address:**

2811 TAMIAMI TRAIL  
SUITE P  
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

**FEI Number:** 26-3503733 **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:**

BROOKS, MITCHELL T  
2811 TAMIAMI TRAIL  
SUITE P  
PORT CHARLOTTE, FL 33952 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: TOURNAS, ANDY  
Address: 155 EAST STREET  
City-St-Zip: WALLINGFORD, CT 06492

Title: D ( ) Delete  
Name: MAGRAY, CINDI  
Address: 6060 ULMERTON ROAD  
City-St-Zip: CLEARWATER, FL 33760

Title: D ( ) Delete  
Name: SMITH, HOWARD  
Address: 28 GARVIES POINT ROAD  
City-St-Zip: GLEN COVE, NY 11542

Title: D ( ) Delete  
Name: DUNN, MIKE  
Address: 1280 PARK CENTER DRIVE  
City-St-Zip: VISTA, CA 92081

Title: D ( ) Delete  
Name: HAMMOCK, STEVEN  
Address: 1280 PARK CENTER DRIVE  
City-St-Zip: VISTA, CA 92081

Title: D ( ) Delete  
Name: SOUSA, SUE  
Address: 305 NASH ROAD  
City-St-Zip: NEW BEDFORD, MA 02746

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: ANDY TOURNAS

P

05/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date