2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

DOCUMENT# N09000002767

Entity Name: UNITED STATES LIFESAVING ASSOCIATION - FORT LAUDERDALE CHAPTER, INC.

Current Principal Place of Business:

501 SEABREEZE BOULEVARD
FORT LAUDERDALE OCEAN RESCUE HEADQUARTERS
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

501 SEABREEZE BOULEVARD
FORT LAUDERDALE OCEAN RESCUE HEADQUARTERS
FORT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCCRADY, JAMES H V
1509 SOUTHWEST 12TH COURT
FORT LAUDERDALE, FL 33312 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
Name: NEUSCHAEFER, KRIS
Address: 501 SEABREEZE BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: VP
Name: REED, ALLEN
Address: 501 SEABREEZE BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: TRES
Name: MCCRADY, JAMES H V
Address: 501 SEABREEZE BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: SEC
Name: READ, DAVID
Address: 501 SEABREEZE BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 33316

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: JAMES HAMILTON MCCRADY V TRES 01/05/2011

Electronic Signature of Signing Officer or Director — Date