

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23674

FILED
Apr 08, 2004
Secretary of State**Entity Name:** THE NORTHEAST FLORIDA CHAPTER OF NATIONAL SPA & POOL INSTITUTE, INC.**Current Principal Place of Business:**2811 D TAMIAMI TR
PORT CHARLOTTE, FL 33952 US**New Principal Place of Business:****Current Mailing Address:**2811 D TAMIAMI TR
PORT CHARLOTTE, FL 33952 US**New Mailing Address:****FEI Number:** 59-2856307**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BROOKS, MITCHELL T
258 BANGSBERG RD SE
PORT CHARLOTTE, FL 33952**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 () Delete
Name: CLAY, ANDREWS
Address: 2251 URBAN RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: DST () Delete
Name: LANDREGAN, SUSAN
Address: 2900 DAWN RD
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: PATE, DEBORAH
Address: 8608 BEACH BLVD
City-St-Zip: JACKSONVILLE, FL 32216

Title: PD () Delete
Name: WILLIAMSON, DAVID
Address: 7952 NORMANDY BLVD
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: CLARKSON, JORDON
Address: 13994-4 BEACH BLVD
City-St-Zip: JACKSONVILLE, FL 32224

Title: D () Delete
Name: SCOTT, JOHN
Address: 317 BCH BLVD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PP (X) Change () Addition
Name: CLAY, ANDREWS
Address: 2251 URBAN RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D (X) Change () Addition
Name: LANDREGAN, SUSAN
Address: 2900 DAWN RD
City-St-Zip: JACKSONVILLE, FL 32207

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

Title: PD (X) Change () Addition
Name: BATTIS, JIM
Address: 1602 3RD ST N
City-St-Zip: JACKSONVILLE, FL 32250

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

Title: VP (X) Change () Addition
Name: SCOTT, JOHN
Address: 317 BEACH BLVD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JIM BATES

P

04/08/2004

Electronic Signature of Signing Officer or Director

Date

S/T DAVID PRUETTE
331-8 PARK RIDGE AVE
ORANGE PARK, FL 32065

S/T DAVID PRUETTE
331-8 PARK RIDGE AVE