

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23674

FILED  
Apr 30, 2006  
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:**

2811 TAMIAMI TR  
SUITE P  
PORT CHARLOTTE, FL 33952 US

**Current Mailing Address:**

2811 D TAMIAMI TR  
PORT CHARLOTTE, FL 33952 US

**New Mailing Address:**

2811 TAMIAMI TR  
SUITE P  
PORT CHARLOTTE, FL 33952 US

**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 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: PP ( ) Delete  
Name: CLAY, ANDREWS  
Address: 2251 URBAN RD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) 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: BATTS, JIM  
Address: 1602 3RD ST N  
City-St-Zip: JACKSONVILLE, FL 32250

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

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

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

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

Title: VP (X) Change ( ) Addition  
Name: ROSWELL, EATON  
Address: 308 S PONCE DELEON BLVD  
City-St-Zip: JACKSONVILLE, FL 32084

Title: S (X) Change ( ) Addition  
Name: MITCH, BROOKS  
Address: 2811 TAMIAMI TRAIL  
City-St-Zip: PORT CHARLOTTE, FL 33952

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

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

Title: P (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 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: MITCH BROOKS

S

04/30/2006

Electronic Signature of Signing Officer or Director

Date