2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24329

FILED Mar 28, 2008 Secretary of State

Entity Name: FLORIDA SWIMMING POOL ASSOCIATION - PALM BEACH JIM SHIREY CHAPTER, INC.

Current Principal Place of Business:				New Principal Place of Business:		
PMB 333, 6230 W INDIANTOWN RD SUITE 7 JUPITER, FL 33458				3031 SW 108 WAY DAVIE, FL 33328		
Current Mailing Address:				New Mailing Address:		
PMB 333, 6230 W INDIANTOWN RD SUITE 7 JUPITER, FL 33458				3031 SW 108 WAY DAVIE, FL 33328		
FEI Number:	65-0124237	FEI Number Applied For ()	FEI Nur	nber Not Appl	licable ()	Certificate of Status Desired ()
Name and	Address of	Current Registered Agent:		Name and	Address	of New Registered Agent:
BISSETT, MICHELLE E 6560 G. CHASEWOOD NORTH SUITE 7 JUPITER, FL 33458 US				ROHNER, DORIS 3031 SW 108 WAY DAVIE, FL 33328 US		
	named entity of Florida.	submits this statement for the	purpose o	of changing i	ts register	red office or registered agent, or both,
SIGNATUF	RE: DORIS I					03/28/2008
	Electro	nic Signature of Registered Ag	gent			Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P (HACKL, STEP 1331 CENTRA LAKE WORTH	L TERRACE		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	S (ALLERT, KIM 2150 AMESBU WELLINGTON			Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	WAGNER, EL 2731 VISTA P) Delete ZABETH ARKWAY SUITE D1 BEACH, FL 33411		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	D (PETERSON, V 6477 WINDING JUPITER, FL	G LAKE DR.		Title: Name: Address: City-St-Zip:	VP STEVENS 6884 152N PALM BEA	
Title: Name: Address: City-St-Zip:	D (SHIREY, MIKE 408 COMMER JUPITER, FL	CE WAY		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	BALLARD, DA 1163 ROYAL			Title: Name: Address: City-St-Zip:		(X) Change () Addition DAN DOKEECHOBEE RD LM BEACH, FL 33409

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: DORIS H ROHNER ED 03/28/2008