

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27567

FILED  
Mar 21, 2012  
Secretary of State

**Entity Name:** FLORIDA SWIMMING POOL ASSOCIATION - TREASURE COAST CHAPTER, INC.

**Current Principal Place of Business:**

265 S.W. PORT ST. LUCIE BLVD  
# 376  
PORT ST LUCIE, FL 34984

**New Principal Place of Business:**

1772 S.W. PALERMO ROAD  
PORT ST LUCIE, FL 34987

**Current Mailing Address:**

265 S.W. PORT ST. LUCIE BLVD  
#376  
PORT ST LUCIE, FL 34984

**New Mailing Address:**

P.O. BOX 8602  
HOBE SOUND, FL 33475

FEI Number: 65-0138845

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GILBERT, SUSAN L ED  
265 SW PORT SAINT LUCIE BLVD  
#376  
PORT SAINT LUCIE, FL 34984 US

**Name and Address of New Registered Agent:**

GILBERT, SUSAN L ED  
1772 S. W. PALERMO ROAD  
PORT SAINT LUCIE, FL 34987 US

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

03/21/2012

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PARKER, KENNETH  
Address: P.O. BOX 8602  
City-St-Zip: HOBE SOUND, FL 33475 US

Title: V  
Name: JANIS, JOSEPH  
Address: 2830S.W. THUNDERBIRD TRAIL  
City-St-Zip: STUART, FL 34997 US

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: SUSAN L. GILBERT

ED

03/21/2012

Electronic Signature of Signing Officer or Director

Date