

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 01, 2009  
Secretary of State**

DOCUMENT# N29827

**Entity Name:** FLORIDA SWIMMING POOL ASSOCIATION - TAMPA BAY CHAPTER, INC.

**Current Principal Place of Business:**

11604 CYPRESS PARK STREET  
TAMPA, FL 33624

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 270585  
TAMPA, FL 336880585

**New Mailing Address:**

**FEI Number:** 59-6933797      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MCDEVITT, DANIEL F ACCTMGR  
2555 PORTER LAKE DRIVE  
SUITE 106  
SARASOTA, FL 34240 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: D ( ) Delete  
Name: CONVERSE, TIM  
Address: 4605 DEERWALK AVE  
City-St-Zip: TAMPA, FL 33624

Title: S ( ) Delete  
Name: GRAY, JOEL  
Address: 8718 PALISADES DR  
City-St-Zip: TAMPA, FL 33615

Title: D ( ) Delete  
Name: MARQUIS, ANNIE  
Address: 2347 BENNETT ROAD  
City-St-Zip: PLANT CITY, FL 33565

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

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

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

Title: P (X) Change ( ) Addition  
Name: ANDREWS, SCOTT  
Address: 18125 N US HWY 41 , SUITE101  
City-St-Zip: LUTZ, FL 33549

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: KAREN COBO

ED

05/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date