2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2008 8:00 am
Secretary of State
07-10-2008 90014 035 ****61.25

DOCUMENT # N30416

1. Entity Name
FLORIDA WOMEN'S SAILING ASSOCIATION, INC.

Principal Place of Business	Mailing Address
948 RIVERSIDE RIDGE RD TARPON SPRINGS, FL 34688 US	948 RIVERSIDE RIDGE RD TARPON SPRINGS, FL 34688 US

07072008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
3352 BAYSHORE BLVD NE	3352 BAYSHORE BLVD NE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ST. PETERSBURG, FL	City & State: ST. PETERSBURG, FL
Zip: 33703 Country: USA	Zip: 33703 Country: USA

4. FEI Number: 59-2365813 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NICHOLSON, FAY
948 RIVERSIDE RIDGE RD
TARPON SPRINGS, FL 34688

7. Name and Address of New Registered Agent

Name: KAREN PARK
Street Address (P.O. Box Number is Not Acceptable): 3352 BAYSHORE BLVD NE
City: ST. PETERSBURG FL Zip Code: 33703

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Karen Park 7/7/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD NICHOLSON, FAY 948 RIVERSIDE RIDGE RD TARPON SPRINGS, FL 34688	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PARK, KAREN 3352 BAYSHORE BLVD NE ST. PETERSBURG, FL 33703	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BUSH, KATHY 100 CENTRAL AVE APT 813 SARASOTA, FL 34236	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD NICHOLSON, FAY 948 RIVERSIDE RIDGE RD TARPON SPRINGS, FL 34688	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MERICLE, FRAN 5642 SHEFFIELD GREENE CIR SARASOTA, FL 34235	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SIMMONS, JOANNE 1073 79TH STREET SOUTH ST. PETERSBURG, FL 33707	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LAPP, SUSAN 7833 1ST AVE S SAINT PETERSBURG, FL 33707	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BETH ANDERSON 742 EAGLE POINT DR. VENICE, FL 34285	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Karen Park 7/7/08 7275272965
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #