

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004031

FILED
Mar 26, 2006
Secretary of State

Entity Name: FLORIDA SWIMMING POOL ASSOCIATION - POLK COUNTY CHAPTER, INC.

Current Principal Place of Business:

2044 ARIANA BLVD
AUBURNDALE, FL 33823 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 762
AUBURNDALE, FL 33823 US

New Mailing Address:

FEI Number: 59-3205397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANION, MARY
2044 ARIANA BLVD
AUBURNDALE, FL 33823 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: ST () Delete
Name: BOSSE, JOAN
Address: 6840 CYPRESS GARDENS BLVD
City-St-Zip: WINTER HAVEN, FL 33884

Title: VPD () Delete
Name: THOMPSON, TRACY
Address: 3210 WINTERLAKE RD., UNIT 4
City-St-Zip: LAKELAND, FL 33806

Title: BD () Delete
Name: DUFFY, CHRISTOPHER
Address: P O BOX 1098
City-St-Zip: AUBURNDALE, FL 33823

Title: P () Delete
Name: JOHNSON, KEITH
Address: 226 E. LAKE AVE.
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GREEN, MICHELLE
Address: 1625 SHEPHERD ROAD
City-St-Zip: LAKELAND, FL 33811

Title: D (X) Change () Addition
Name: THOMPSON, TRACY
Address: 3402 REYNOLDS ROAD
City-St-Zip: LAKELAND, FL 33806

Title: VP (X) Change () Addition
Name: BOYLES, WILLIAM
Address: 1435 NORTH COMBEE ROAD
City-St-Zip: LAKELAND, FL 33801

Title: D (X) Change () Addition
Name: JOHNSON, KEITH
Address: 226 E. LAKE AVE.
City-St-Zip: AUBURNDALE, FL 33823

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: MICHELLE GREEN

P

03/26/2006

Electronic Signature of Signing Officer or Director

Date