2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# N98000003343

Entity Name: COMPETITIVE AQUATIC SUPPORT FOUNDATION, INC.

Current Principal Place of Business:

674 MOSSY BRANCH CT.
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 916286
LONGWOOD, FL 32791

New Mailing Address:

FEI Number: 59-3515362 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PARNELL, JOHN C PRES
674 MOSSY BRANCH CT.
LONGWOOD, FL 32779 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:	P	( ) Delete
Name:	PARNELL, JOHN CLAY	
Address:	674 MOSSY BRANCH CT.	
City-St-Zip:	LONGWOOD, FL 32779 US	
Title:	T	( ) Delete
Name:	PARNELL, KRISTEN B TREAS	
Address:	674 MOSSY BRANCH CT	
City-St-Zip:	LONGWOOD, FL 32779	
Title:	D	(X) Delete
Name:	BRADLEY, PAUL D	
Address:	244 CHURCHHILL DR	
City-St-Zip:	LONGWOOD, FL 32779	
Title:	D	(X) Delete
Name:	PAULEY, EUGENE W	
Address:	2511 BROADVIEW CT	
City-St-Zip:	EUSTIS, FL 32726	
Title:	D	(X) Delete
Name:	MOON, TIM	
Address:	107 SWEETWATER HILLS DR	
City-St-Zip:	LONGWOOD, FL 32779	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JOHN CLAY PARNELL PRES 04/13/2009

Electronic Signature of Signing Officer or Director — Date