

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006857

FILED
Apr 30, 2006
Secretary of State

Entity Name: SOUTHWEST FLORIDA POOL & SPA FOUNDATION, INC.

Current Principal Place of Business:

2811D TAMIAMI TRL
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

2811 TAMIAMI TRAIL
SUITE P
PORT CHARLOTTE, FL 33952

Current Mailing Address:

2811D TAMIAMI TRL
PORT CHARLOTTE, FL 33952

New Mailing Address:

2811 TAMIAMI TRAIL
SUITE P
PORT CHARLOTTE, FL 33952

FEI Number: 65-0959887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROOKS, MITCHELL T
258 BANGSBERG RD. SE
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

BROOKS, MITCHELL T
258 BANGSBERG RD SE
PORT CHARLOTTE, FL 33952 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: MITCHELL T. BROOKS

04/30/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FAY, ED
Address: 4507 9TH ST WEST # I-8
City-St-Zip: BRADENTON, FL 34207

Title: S/T () Delete
Name: ALLBRIGHT, PETER
Address: 21524 DOBBIS AVE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: ALLBRIGHT, PETER
Address: 21524 DOBBIS AVE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: S () Change (X) Addition
Name: BROOKS, MITCH
Address: 2811 - P TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D () Change (X) Addition
Name: HUBBARD, TODD
Address: 6009 BUSINESS BLVD.
City-St-Zip: SARASOTA, FL 33952

Title: D () Change (X) Addition
Name: MCTIGUE, COLIN
Address: 19800 VETERANS HIGHWAY
City-St-Zip: PORT CHARLOTTE, FL 33952

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: MITCH BROOKS

S

04/30/2006

Electronic Signature of Signing Officer or Director

Date