Cornerstone Centre 3830 Tampa Road, Suite 150 Palm Harbor, FL 34684

Telephone (727) 785-6721 Telecopier (727) 785-0798 E-mail: attorneydayhoff@aol.com

December 21, 2001

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Re: Swim Temp, Inc.

Dear Sir/Madam:

Please find enclosed each of the following:

1. An original and one copy of a Resignation of Registered Agent.

2. A check in the sum of \$87.50 payable to the Florida Department for your filing fee.

Please file this Resignation of Registered Agent. Then please return file-stamped copy. Thanking you in advance for your cooperation, I am

Sincerely yours,

CHARLES S. DAYHOFF III

CSD:bf Enclosure 01-1833-DC Sarbo of Mrs. On

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, CHARLES S. DAYHOFF III (Name of registered agent)
hereby resigns as Registered Agent for SWIMTEMP, INC. (Name of corporation)
A copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date by which this statement is filed.
(Signature of resigning agent)
If signing on behalf of an entity:
(Typed or Printed Name)
(Capacity)

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314