

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 466563

1. Entity Name

SWIM-N-STUFF, INC.

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90047 016 ***150.00

Principal Place of Business

Mailing Address

2680 W HIGHWAY 434
LONGWOOD FL 32779

2680 W HIGHWAY 434
LONGWOOD FL 32779-4890

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1576264

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~VAN DE HOUTEN, RICHARD S.~~ DECEASED
1300 WINSTON ROAD
MAITLAND FL 32751

Name MICHELLE J. VANDE HOUTEN
Street Address (P.O. Box Number is Not Acceptable)
1300 WINSTON RD
MAITLAND
City FL Zip Code 32751

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.

SIGNATURE *Michelle J. VanDeHouten*

MICHELLE J. VANDEHOUTEN

3/15/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME VAN DE HOUTEN, MICHELLE
STREET ADDRESS 1300 WINSTON RD
CITY-ST-ZIP MAITLAND FL 32751 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME WHEELER BROLE C.
STREET ADDRESS 1400 STONE TRAIL
CITY-ST-ZIP ENTERPRISE, FL 32725 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SEC/TREAS
NAME R. SCOTT VANDEHOUTEN
STREET ADDRESS 1360 ONONDAGA DR
CITY-ST-ZIP GENEVA, FL 32732 ☐ 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

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michelle J. VanDeHouten*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHELLE J. VANDEHOUTEN

3/15/00

Date

407/862-4600

Daytime Phone #

CR2E034 (9/99)