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May 30 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 701567 (0)

1. Corporation Name

BRANDON HILLS SWIM CLUB, INC.

Principal Place of Business

Mailing Address

712 W SYLVAN DRIVE
BRANDON FL 33510-3544

712 W SYLVAN DRIVE
BRANDON FL 33510-3544



3. Date Incorporated or Qualified
10/20/1960

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip 25 Country

29 Zip 30 Country

4. FEI Number

59-1169656

Applied For
Not Applicable

6. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HORST, MARK
604 CAROLYN DR
BRANDON FL 33510

81 Name

STETLER, POLLY

82 Street Address (P.O. Box Number is Not Acceptable)

706 WEST SYLVAN DR.

83

84 City

BRANDON

FL

85 Zip Code
33510

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

5-28-97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE SD
NAME LUBECK, CHRIS
STREET ADDRESS 601 N. SYLVAN DR
CITY-ST-ZIP BRANDON FL

DELETE

1.1 TITLE SD
1.2 NAME COPE, GAIL
1.3 STREET ADDRESS 612 CAROLYN DR
1.4 CITY-ST-ZIP BRANDON FL

Change Addition

TITLE VPD
NAME CARROLL, PHILLIP
STREET ADDRESS 610 CAROLYN DR
CITY-ST-ZIP BRANDON FL 33510

DELETE

2.1 TITLE VPD
2.2 NAME NORRINGTON, SCOTT
2.3 STREET ADDRESS 607 CAROLYN DR
2.4 CITY-ST-ZIP BRANDON, FL

Change Addition

TITLE PD
NAME WILLIAMS, ROBERT
STREET ADDRESS 708 W SYLVAN DR
CITY-ST-ZIP BRANDON FL

DELETE

3.1 TITLE PD
3.2 NAME WERNER, JOHN
3.3 STREET ADDRESS 710 WEST SYLVAN DR
3.4 CITY-ST-ZIP BRANDON, FL

Change Addition

TITLE TD
NAME HORST, MARK
STREET ADDRESS 604 CAROLYN DR
CITY-ST-ZIP BRANDON FL 33510

DELETE

4.1 TITLE TD
4.2 NAME STETLER, POLLY
4.3 STREET ADDRESS 706 WEST SYLVAN DR
4.4 CITY-ST-ZIP BRANDON, FL

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

14. I do 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mark Horst
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-97 813-684-8048

CR2E037 (9/96)