

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 701567

1. Entity Name

BRANDON HILLS SWIM CLUB, INC.

**FILED**  
**May 04, 2001 8:00 am**  
**Secretary of State**

05-04-2001 90003 028 \*\*\*\*61.25

Principal Place of Business

712 W SYLVAN DRIVE  
 BRANDON FL 33510-3544

Mailing Address

712 W SYLVAN DRIVE  
 BRANDON FL 33510-3544

547865



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1169656

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

WILLIAMS, KERSTIN  
 708 W LYNN SYLVAN DR  
 BRANDON FL 33510

Name

MARK HORST

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

604 CAROLYN DR.

City

BRANDON

FL

Zip Code

33510

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

*Mark Horst*

4-27-01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
 FEE IS \$61.25

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

\$5.00 May Be  
 Added to Fees

Make Check Payable to  
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD ☐ Delete  
 NAME COPE, GAIL  
 STREET ADDRESS 612 CAROLYN DR  
 CITY-ST-ZIP BRANDON FL

TITLE T/D ☐ Change ☒ Addition  
 NAME PENNY HALL  
 STREET ADDRESS 602 BEVERLY  
 CITY-ST-ZIP BRANDON FL 33510

TITLE VPD ☒ Delete  
 NAME GEE, MARK  
 STREET ADDRESS 605 NORTH SYLVAN DR  
 CITY-ST-ZIP BRANDON FL

TITLE J/D ☐ Change ☒ Addition  
 NAME JILL HORST  
 STREET ADDRESS 604 CAROLYN DR.  
 CITY-ST-ZIP BRANDON FL 33510

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

TITLE P/D ☐ Change ☒ Addition  
 NAME JUSTINE WILKES  
 STREET ADDRESS 704 N. SYLVAN  
 CITY-ST-ZIP BRANDON FL 33510

TITLE TD ☒ Delete  
 NAME WILLIAMS, KERSTIN  
 STREET ADDRESS 708 W SYLVAN DR  
 CITY-ST-ZIP BRANDON FL 33510

TITLE P/D ☒ Change ☐ Addition  
 NAME CARROLL, PHILLIP  
 STREET ADDRESS 610 CAROLYN DR.  
 CITY-ST-ZIP BRANDON FL 33510

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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

4/28/01

684-8048

Date

Daytime Phone #

CR2E037 (10/00)