

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770112

FILED
Jan 14, 2004
Secretary of State

Entity Name: THE FORT MYERS SWIM CLUB, INC.

Current Principal Place of Business:

1865 GOLFVIEW AVENUE
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

1865 GOLFVIEW AVENUE
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 59-0841824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOX, GEORGE T
5912 TROPICAL DR
FT. MYERS, FL 33919

Name and Address of New Registered Agent:

BOWMAN, DONNA
5415 BRANDY CIRCLE
FT. MYERS, FL 33919

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: DONNA BOWMAN

01/14/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FOX, GEORGE T
Address: 5912 TROPICAL DR
City-St-Zip: FORT MYERS, FL 33919

Title: VP () Delete
Name: BOWMAN, DONNA
Address: 5415 BRINDY CIRCLE
City-St-Zip: FORT MYERS, FL 33719

Title: S () Delete
Name: MASTERSON, LINDA
Address: 1316 SUNBURY DRIVE
City-St-Zip: FORT MYERS, FL 33901

Title: SD () Delete
Name: GRETZ, ROBIN
Address: 3924 MAXINE ST
City-St-Zip: FORT MYERS, FL 33901

Title: D () Delete
Name: POCCI, KAREN
Address: 14335 ALCAZAR AVE
City-St-Zip: FORT MYERS, FL 33901

Title: D () Delete
Name: HOUCHIN, DALE
Address: 3738 PRINCETON ST
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: RUSSELL, JACQUE
Address: 3728 LUVERNE STREET
City-St-Zip: FORT MYERS, FL 33901

Title: P (X) Change () Addition
Name: BOWMAN, DONNA
Address: 5415 BRINDY CIRCLE
City-St-Zip: FORT MYERS, FL 33719

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

Title: T (X) Change () Addition
Name: GRETZ, ROBIN
Address: 3924 MAXINE ST
City-St-Zip: FORT MYERS, FL 33901

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DONNA BOWMAN

P

01/14/2004

Electronic Signature of Signing Officer or Director

Date