

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005024

FILED
Feb 05, 2005
Secretary of State

Entity Name: EASTLAKE WOODLANDS SWIM TEAM, INC.

Current Principal Place of Business:

1374 FORESTEDGE BLVD
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

1374 FORESTEDGE BLVD
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 59-3741110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOYA, CAROL C
2295 WARWICK DR
OLDSMAR, FL 34677 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LOTZ, SYBIL
Address: 1374 FORESTEDGE BLVD
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: SHEETS, JOY
Address: 1374 FORESTEDGE BLVD.
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: CARBONELLI, JILL
Address: 3349 ASHWOOD CT.
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SYBIL LOTZ

D

02/05/2005

Electronic Signature of Signing Officer or Director

Date