

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003486

FILED  
Feb 12, 2007  
Secretary of State

Entity Name: SWIM FOR LIFE FLORIDA INCORPORATED

## Current Principal Place of Business:

1911 N LIME ST  
PLANT CITY, FL 33563

## New Principal Place of Business:

1018 S. WIGGINS RD  
PLANT CITY, FL 33566

## Current Mailing Address:

P O BOX 311045  
TAMPA, FL 33680

## New Mailing Address:

FEI Number: 59-3582215      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BATTEN, MARY K  
1911 N LIME ST  
PLANT CITY, FL 33563      US

## Name and Address of New Registered Agent:

BATTEN, MARY K  
1018 S. WIGGINS RD  
PLANT CITY, FL 33566      US

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:

02/12/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP      ( ) Delete  
Name: BATTEN, MARY K  
Address: 1911 N LIME ST  
City-St-Zip: PLANT CITY, FL 33563

Title: DVC      ( ) Delete  
Name: DEIBERN, CAROLE Y  
Address: 654 RIVIERE RD  
City-St-Zip: PALM HARBOR, FL 34683

Title: DS      ( ) Delete  
Name: MAYNARD, BEVIN  
Address: 5502 N NEBRASKA AVE  
City-St-Zip: TAMPA, FL 33604

Title: D      ( ) Delete  
Name: MOORE, BETH  
Address: 3020 W LAUREL STREET  
City-St-Zip: TAMPA, FL 33607

Title: DT      ( ) Delete  
Name: HAYES, MALCOLM  
Address: 503 W DRANE ST S  
City-St-Zip: PLANTCITY, FL 33563

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP      (X) Change ( ) Addition  
Name: BATTEN, MARY K  
Address: 1018 S. WIGGINS RD  
City-St-Zip: PLANT CITY, FL 33566

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

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 Chapter 119, 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: MARY K. BATTEN

EX D

02/12/2007

Electronic Signature of Signing Officer or Director

Date