

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N28373

1. Entity Name

NATIONAL SWIM SCHOOL ASSOCIATION, INC.

FILED
May 30, 2000 8:00 am
Secretary of State

05-30-2000 90084 038 ****61.25

Principal Place of Business

Mailing Address

776 21ST AVE. NORTH
 ST. PETERSBURG FL 33704-3348

776 21ST AVE. NORTH
 ST. PETERSBURG FL 33704-3348

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2909888

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRAVES, STEPHEN W
 776 21ST AVE. NORTH
 ST. PETERSBURG FL 33704-3348

Name

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

City

FL

Zip Code

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

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 PD ☒ Delete
 NAME CROWLEY, MARTHA S
 STREET ADDRESS 13212 PROVIDENCE GREEN CT
 CITY-ST-ZIP CHARLOTTE NC 28277

TITLE VP ☐ Change ☒ Addition
 NAME John Johnson
 STREET ADDRESS 285 E. main St. #1
 CITY-ST-ZIP Tustin, CA 92870

TITLE VD ☒ Delete
 NAME BURGER, PEGGY
 STREET ADDRESS 2790 S. TORREY PINES DR.
 CITY-ST-ZIP LAS VEGAS NV 89102

TITLE ☐ Change ☒ Addition
 NAME Steve Sherman
 STREET ADDRESS 243 STRAWHAW CIR.
 CITY-ST-ZIP Clayton, CA 94517

TITLE D ☐ Delete
 NAME KENNEDY, KRIS
 STREET ADDRESS 320 W. MAIN ST
 CITY-ST-ZIP BIRDSBORO PA 19508

TITLE ☒ Change ☐ Addition
 NAME President

TITLE D ☒ Delete
 NAME FLAHE, GINNY
 STREET ADDRESS 1130 E. COLLINS AVE
 CITY-ST-ZIP ORANGE CA 19508

TITLE ☐ Change ☒ Addition
 NAME Jim Mance
 STREET ADDRESS 512 N CARIBE
 CITY-ST-ZIP Tucson, AZ 85710

TITLE D ☐ Delete
 NAME KITTLESAN, KAREN
 STREET ADDRESS 1001 DEMING WAY
 CITY-ST-ZIP MADISON WI 53717

TITLE ☐ Change ☐ Addition

TITLE D ☐ Delete
 NAME HUBBARD, ROBERT
 STREET ADDRESS P.O. BOX 31183
 CITY-ST-ZIP PHOENIX AZ 85046

TITLE ☐ Change ☐ Addition

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:

Stephan W. Graves, Exec. Dir.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1500

727
 896-7946
 Date Daytime Phone #

CR2E037 (9/99)