

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004887

FILED
Jan 12, 2009
Secretary of State

Entity Name: DAYTONA BEACH SWIMMING, INC.

Current Principal Place of Business:

1726 CREEKWATER BLVD.
PORT ORANGE, FL 32128 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 291968
PORT ORANGE, FL 32129 US

New Mailing Address:

FEI Number: 59-3400332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VENABLES, BRIAN T
1726 CREEKWATER BLVD.
PORT ORANGE, FL 32128 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: T () Delete
Name: KLOTZBACH, ROBERT
Address: 2237 JUANITA DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VC () Delete
Name: BRETT, RANDY
Address: 450 MERRIMAC DRIVE
City-St-Zip: PORT ORANGE, FL 32127

Title: VC () Delete
Name: BRENNEMAN, DENISE
Address: 406 QUAY ASSISI
City-St-Zip: NEWSMYRNA BEACH, FL 32169

Title: S () Delete
Name: CLANCY, MARY
Address: 203 SANDY LANE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: C-D () Delete
Name: VENABLES, BRIAN T
Address: 1726 CREEKWATER BLVD.
City-St-Zip: PORT ORANGE, FL 32128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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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 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: BRIAN T. VENABLES

C-D

01/12/2009

Electronic Signature of Signing Officer or Director

Date