## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 21, 2000 08:00 AM DOCUMENT # N9900004004 1. Entity Name **Secretary of State** SWIM FLORIDA MASTERS SWIM TEAM, INC. Principal Place of Business Mailing Address 17620 TAYLOR DRIVE 17620 TAYLOR DRIVE FORT MYERS FL FORT MYERS FL 33908 33908 2. Principal Place of Business 3. Mailing Address 13822 FERN TRAIL DRIVE 13822 FERN TRAIL DRIVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For NORTH FORT MYERS FL NORTH FORT MYERS FL 65-0932459 Not Applicable Zic Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П 33903 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STEGEMAN IRVING 17620 TAYLOR DRIVE Street Address (P.O. Box Number is Not Acceptable) 13822 FERN TRAIL DRIVE FORT MYERS FL. Zip Code NORTH FORT MYERS 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 ROBERT B. IRVING 04/21/2000 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) ญ็หญ่≥าเก็ ก็เรียกได้ FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delate TITLE D X Addition NAME NAME GILLIGAN CHRIS STREET ADDRESS STPEET ADDRESS 3008 BAYSHORE ROAD CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL32234 TITLE ☐ Delete D ☐ Change XI Addition NAME NAME MITCHINSON DEAN STREET ADDRESS STREET ADDRESS 4120 S.W. 6TH PLACE CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL 33914 TITLE ☐ Delete TITLE SD ☐ Change **X** Addition NAME NAME ADRIENNE STREET ADDRESS STREET ADDRESS 4790 SOUTH CLEVELAND AVENUE, R-1806 CITY-ST-ZIP CITY-ST-7iP FORT MYERS $\mathbf{FL}$ 33907 TITLE ☐ Delete TITLE XI Change ☐ Addition NAME PALMERE JAMES PALMERE JAMES STREET ADDRESS 16615 CORINADER LANE STREET ADDRESS 16615 CORIANDER LANE CITY-ST-ZIP FORT MYERS FORT MYERS 33908 CITY-ST-ZIP 33908 TITLE ☐ Delete TITLE VPD X Change ☐ Addition NAME GREGG STHART NAR/F GEER DREN STREET ADDRESS 11860 ISLAND AVENUE STREET ADDRESS 309 PINE RUN DRIVE CITY-ST-ZIP MATLACHA 33993 CITY-ST-ZIP OSPREY FT. 34229 TITLE ☐ Delete TITLE XI Change ☐ Addition NAME STEGEMAN THOMAS

33908

STREET ADDRESS

CITY-ST-ZIP

13822 FERN TRAIL DRIVE

33903

NORTH FORT MYERS

STREET ADDRESS

CITY-ST-ZIP

17620 TAYLOR DRIVE

FORT MYERS

<sup>12.</sup> 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.

RICHARD BREWER, DIRECTOR 2871 4TH STREET N.E.

**NAPLES, FL 34120**