

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N99000005429					
1. Entity Name SWIM AND DIVE BOOSTERS OF DUNEDIN HIGH SCHOOL, INC.					
Principal Place of Business 1651 PINEHURST RD. DUNEDIN, FL 34698			Mailing Address 1651 PINEHURST RD. DUNEDIN, FL 34698		
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				Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GAUZENS, ALAN 1271 ROYAL OAK DRIVE DUNEDIN, FL 34698				7. Name and Address of New Registered Agent Name <u>LISA Riley</u> Street Address (P.O. Box Number is Not Acceptable) <u>1542 Cottonwood Terrace</u> City <u>Dunedin</u> FL <u>34698</u>	
8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>[Signature]</u> DATE <u>5-20-03</u> Signature (Typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when it is missing)					
FILE NOW: FEE IS \$81.25		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
		Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	GAUZENS, JOANNE		NAME		
STREET ADDRESS	1271 ROYAL OAK DR		STREET ADDRESS		
CITY-ST-ZIP	DUNEDIN, FL 34698		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	GAUZENS, ALAN		NAME		
STREET ADDRESS	1271 ROYAL OAK DR.		STREET ADDRESS		
CITY-ST-ZIP	DUNEDIN, FL 34698		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☒ Change ☐ Addition	
NAME	FUSARI, ANNA		NAME	<u>Lisa Riley</u>	
STREET ADDRESS	1924 HASTINGS DR		STREET ADDRESS	<u>1542 Cottonwood Ter.</u>	
CITY-ST-ZIP	CLEARWATER, FL 33763		CITY-ST-ZIP	<u>Dunedin, FL 34698</u>	
TITLE	D	☐ Delete	TITLE	☒ Change ☐ Addition	
NAME	DUCK, DEBBIE		NAME	<u>Tom Riley</u>	
STREET ADDRESS	391 DUNCAN LOOP W. APT 201		STREET ADDRESS	<u>1542 Cottonwood Ter.</u>	
CITY-ST-ZIP	DUNEDIN, FL 34698		CITY-ST-ZIP	<u>Dunedin, FL 34698</u>	
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	EASH, MARGIE		NAME		
STREET ADDRESS	1848 ROYAL OAK PLACE EAST		STREET ADDRESS		
CITY-ST-ZIP	DUNEDIN, FL 34698		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: <u>[Signature]</u>			DATE: <u>5-20-03</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

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\$861.00