

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000096596

Entity Name: SWIMFASTER, INCORPORATED

FILED  
Aug 30, 2007  
Secretary of State

## Current Principal Place of Business:

6931 LUCCA STREET  
ORLANDO, FL 32819

## New Principal Place of Business:

9112 IVEY HILL CT  
ORLANDO, FL 32819

## Current Mailing Address:

6931 LUCCA STREET  
ORLANDO, FL 32819

## New Mailing Address:

PO BOX 691385  
ORLANDO, FL 32869

FEI Number: 76-0832897

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NASH, CAROL  
6931 LUCCA STREET  
ORLANDO, FL 32819 US

## Name and Address of New Registered Agent:

NASH, CAROL  
9112 IVEY HILL CT  
ORLANDO, FL 32819 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: CAROL NASH

08/30/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: NASH, CAROL  
Address: 6931 LUCCA STREET  
City-St-Zip: ORLANDO, FL 32819

Title: D ( ) Delete  
Name: NASH, MEL  
Address: 6931 LUCCA STREET  
City-St-Zip: ORLANDO, FL 32819

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: NASH, CAROL  
Address: 9112 IVEY HILL CT.  
City-St-Zip: ORLANDO, FL 32819

Title: D (X) Change ( ) Addition  
Name: NASH, MEL  
Address: 9112 IVEY HILL CT.  
City-St-Zip: ORLANDO, FL 32819

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL NASH

D

08/30/2007

Electronic Signature of Signing Officer or Director

Date