

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000035923

Entity Name: FLORIDA SWIM ACADEMY, INC.

FILED
Apr 26, 2009
Secretary of State

Current Principal Place of Business:

7600 LYONS ROAD
COCOUT CREEK, FL 33073

New Principal Place of Business:

6661 W. BOYNTON BEACH BLVD.
BOYNTON BEACH, FL 33437

Current Mailing Address:

4042 BLUE SAGE PATH
BOYNTON BEACH, FL 33436

New Mailing Address:

FEI Number: 20-8690571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMANN, LOUISE M
13126 VIA VESTA
DELRAY BEACH, FL 33484 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRECHETTE, GAYLE
Address: 7600 LYONS ROAD
City-St-Zip: COCONUT CREEK, FL 33073

Title: VP () Delete
Name: SFERES, TRACY
Address: 7600 LYONS ROAD
City-St-Zip: COCONUT CREEK, FL 33073

Title: S () Delete
Name: MICIANO, MARCELLA
Address: 7600 LYONS ROAD
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: () Change () Addition
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GAYLE FRECHETTE

PRES

04/26/2009

Electronic Signature of Signing Officer or Director

Date