

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000002409 (9)

1. Corporation Name

SWIMAMERICA, INC.



Principal Place of Business

301 S E 20TH ST
FT. LAUDERDALE FL 33316
US

Mailing Address

301 S E 20TH ST
FT. LAUDERDALE FL 33316
US

3. Date Incorporated or Qualified
01/06/1993

3a. Date of Last Report
05/11/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0388427

Applied For

Not Applicable

22

27

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23

28

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEONARD, JOHN
301 S E 20TH ST
FT. LAUDERDALE FL 33316

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and date if applicable

(If not a Registered Agent, signature required when first stated)

DATE

3/22/96

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	LEONARD, JOHN	
STREET ADDRESS	301 SE 20TH STREET	
CITY- ST- ZIP	FT. LAUDERDALE FL	
TITLE	D	DELETE
NAME	MONTRELLA, JIM	
STREET ADDRESS	1498 PEMBERTON DR	
CITY- ST- ZIP	COLUMBUS OH 43221	
TITLE	D	DELETE
NAME	DALAND, PETER	
STREET ADDRESS	4235 LAUREL GLEN	
CITY- ST- ZIP	MOORE PARK CA 93021	
TITLE	D	DELETE
NAME	BLAIR, PAUL	
STREET ADDRESS	1 HUNTINGTON DR	
CITY- ST- ZIP	LITTLE ROCK AR 72207	
TITLE	D	DELETE
NAME	HANSEL, PHILL	
STREET ADDRESS	2428 RICHTON ST	
CITY- ST- ZIP	HOUSTON TX 77098	
TITLE	D	DELETE
NAME	MCKEE, KATHY	
STREET ADDRESS	4025 WOODRIDGE WAY	
CITY- ST- ZIP	TUCKER GA 30084	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY- ST- ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY- ST- ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY- ST- ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY- ST- ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY- ST- ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY- ST- ZIP		

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-04/22/96--01014--021
***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)

4-19-96
JLR

4-15-96