


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 07 1998 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # P94000018189 (8)

1. Corporation Name
SWIM WORLD OF NAPLES, INC.

Principal Place of Business
1918 ROBINHOOD STREET
SARASOTA FL
US

Mailing Address
1918 ROBINHOOD STREET
SARASOTA FL
US



DO NOT WRITE IN THIS SPACE

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|---|--|--|--|---|--|
| 2. Principal Place of Business 21 7222 Isle of Capri Road, Suite, Apt. #, etc. 22 Suite 80 City & State 23 Naples, FL Zip 24 34114 Country 25 Collier | | 2a. Mailing Address 26 P. O. Box 9 Suite, Apt. #, etc. 27 City & State 28 Sarasota, FL Zip 29 34230-0009 Country 30 Sarasota | | 3. Date Incorporated or Qualified 03/08/1994 4. FEI Number 65-0462664 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
|---|--|--|--|---|--|

8. Name and Address of Current Registered Agent

THOMAS J JOHNSON JR
1918 ROBINHOOD STREET
SARASOTA FL 34231

10. Name and Address of New Registered Agent

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| 81 Name Thomas J. Johnson, Jr. 82 Street Address (P.O. Box Number is Not Acceptable) 5250 S. McIntosh Road 83 84 City Sarasota FL 85 Zip Code 34233 |
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11. Pursuant to the provisions of Sections 607.0502 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 Thomas J. Johnson, Jr., President 4/23/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature voids without filing) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|--|---|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD THOMAS J JOHNSON JR 1918 ROBINHOOD STREET SARASOTA FL <input type="checkbox"/> DELETE | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVPP JUDITH H JOHNSON 1918 ROBINHOOD STREET SARASOTA FL <input type="checkbox"/> DELETE | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. 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 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:

4/23/98

CR2E034 (10/97)