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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

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THE REAL PROPERTY.

CITY-ST-ZIP

BIOMATTIBE, VEDA NACIAUCHEDIV



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000049014 (0)

SWIMAMERICA OF SARASOTA, INC.

Principal Place of Business Mailing Address 3671 BENEVA OAKS DRIVE P.O. BOX 18716 VANOUS SITES. POOLS SARASOTA FL 34276 DO NOT WRITE IN THIS SPACE SARASOTA FL 34238 3. Date Incorporated or Qualified 06/22/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0597767 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intaggible 24 29 Personal Property Tax due June 30. Yes Yes 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent WALKER, DEBORAH W <u>Vera McClaugherty</u> 3671 BENEVA OAKS DRIVE Street Address (P.O. Box Number is Not Acceptable) **SARASOTA FL 34238** 226 South Prairie View Drive 83 Various Site**s,** Pools 84 City Zip Code Sarasota 34232 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. M. Claughesty ed name of registered agent and talk it applicately SIGNATURE VERA McCLAUGHERTY <u>April 1, 1998</u> OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. X DELETE X Change Addition **PVTS** 1.1 THLE TITLE PVTS WALKER, DEBORAH W 1.2 NAME NAME VERA McCLAUGHERTY STREET ADDRESS **36**71 BENEVA OAKS DRIVE 1.3 STREET ADDRESS 4226 SOUTH PRAIRIE VIEW DRIVE SARASOTA FL 34238 CITY-ST-ZIP 1.4 CITY-ST-ZIP SARASOTA, FL 34232 DELETE TITLE 2.1 TITLE ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST-ZIP 2. 4 CITY - ST - ZIP Change DELETE TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change 4.1 TITLE ☐ Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change \_\_\_ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP Change DELETE Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

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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. (941) 371-1887

FILED

Apr 29 1998 8:00am

Secretary of State