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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000025407 (3) SWIMMASTERS OF SARASOTA, INC.

FILED Apr 15 1997 8:00am Secretary of State



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NOKOMIS FL 34275 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 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 re agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. Pursuant to the provisions of Sections 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 16. Change 16. DELETE 17. TITLE 17. TITLE 18. Change 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 19. ADI				اً ا	Name	\mathcal{N}	I A			
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 reflected 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 reagonal 1 am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes. SIGNATURE 2. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. BEECK, MAUREEN T 302 WEST ROSSETTI DRIVE 1.1 AUM 1.2 NAME 1.2 NAME 1.3 SIRRET ADDRESS 1.4 CITY-ST-2P ITTE 1.7 AUM 1.4 CITY-ST-2P ITTE 1.5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1.4 CITY-ST-2P ITTE 1.5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1.5 STREET ADDRESS 1.5 STREET ADDR				8	2 Street	Address	s (P.O. Box Number is Not Acceptab	ole)		
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11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its regional and function of both in the State of Fordia. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as reagent 1 am function with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE 2				8	4 City			FI	85 Zip) Code
12.	office or re agent 1 an SIGNATURE	gistered agent, or both, in the State n familiar with, and accept the obliga	of Florida. Such change war tions of, Section 607.0505,	s authorized Florida Statul	by the corp es.	poration	's board of directors. I hereby accep	ot the app	ointment a	.s registered
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CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Edo 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	CITY-ST ZIP									

Lam an officer or director of the corporation or the receiver or trustee a papears in Block 1/ or Block 3/ it changed, or on an attachment with a powered to execute this report as required by Chapter 607, Florida Statutes; and that my name