

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000056238

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: TOBER SWIM SCHOOL, INC.

Current Principal Place of Business:

174 SW PARISH TERRACE
PORT SAINT LUCIE, FL 34984 US

New Principal Place of Business:

Current Mailing Address:

174 SW PARISH TERRACE
PORT SAINT LUCIE, FL 34984 US

New Mailing Address:

FEI Number: 65-0841165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSON, MARK G
2530 S.W. THIRD AVE., STE. 102
MIAMI, FL 331292034 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TOBER, MICHAEL K MR.
Address: 1136 S. W. PARISH TERRACE
City-St-Zip: PORT ST. LUCIE, FL 349843636 US

Title: DS () Delete
Name: HANSON, MARK G ESQ.
Address: 2530 SW THIRD AVE- #102
City-St-Zip: MIAMI, FL 331292034 US

Title: VP () Delete
Name: MILLEY, LESLIE A MS.
Address: 1136 S.W. PARISH TERRACE
City-St-Zip: PORT ST. LUCIE, FL 349843636 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: TOBER, LESLIE A MRS.
Address: 1136 S.W. PARISH TERRACE
City-St-Zip: PORT ST. LUCIE, FL 349843636 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LESLIE A. TOBER

VP

04/30/2002

Electronic Signature of Signing Officer or Director

Date