

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000089399

Entity Name: SWOOSH DESIGN, INC.

FILED
Jul 03, 2002 8:00 AM
Secretary of State

Current Principal Place of Business:

278- W SABAL PALM PLACE
LONGWOOD, FL 23779

New Principal Place of Business:

397 WINCHESTER PLACE
LONGWOOD, FL 23779

Current Mailing Address:

P. O. BOX 915205
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-3545446

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POHL & SHORT, P.A.
280 W. CANTON AVENUE
SUITE 410
WINTER PARK, FL 32789 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: D () Delete
Name: SCHLEIFFARTH, CATHERINE
Address: 278- W SABAL PALM PLACE
City-St-Zip: LONGWOOD, FL 23779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCHLEIFFARTH, CATHERINE
Address: 397 WINCHESTER PLACE
City-St-Zip: LONGWOOD, FL 23779

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: CATHERINE A. SCHLEIFFARTH

D

07/03/2002

Electronic Signature of Signing Officer or Director

Date