## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000091408

Entity Name: SWIM, INC.

Address:

City-St-Zip:

4519 NORTHGATE CT

SARASOTA, FL 34234

FILED Jan 17, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4519 NORTHGATE CT 2119 GLOBAL COURT SARASOTA, FL 34234 SARASOTA, FL 34240 **Current Mailing Address: New Mailing Address:** 4519 NORTHGATE CT 2119 GLOBAL COURT SARASOTA, FL 34234 SARASOTA, FL 34240 FEI Number: 65-1019742 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHNSON, DANNIE S 6767 MAUŃA LOA BLVD. SARASOTA, FL 34241 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition JOHNSON, DANNIE S JOHNSON, DANNIE S Name: Name: 4519 NORTHGATE CT 6767 MAUNA LOA BLVD. Address: Address: City-St-Zip: SARASOTA, FL 34234 City-St-Zip: SARASOTA, FL 34241 Title: Title: (X) Change ( ) Addition () Delete JOHNSON, JUDITH E JOHNSON, JUDITH E Name: Name: 4519 NORTHGATE CT 6767 MAUNA LOA BLVD. Address: Address: SARASOTA, FL 34234 City-St-Zip: City-St-Zip: SARASOTA, FL 34241 Title: Title: (X) Change ( ) Addition ( ) Delete VΡ JOHNSON, JUDITH E JOHNSON, JUDITH E Name: Name: 4519 NORTHGATE CT 6767 MAUNA LOA BLVD. Address: Address: City-St-Zip: SARASOTA, FL 34234 City-St-Zip: SARASOTA, FL 34241 Title: ( ) Delete Title: (X) Change ( ) Addition JOHNSON, DANNIE S JOHNSON, DANNIE S Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119 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.

Address:

City-St-Zip:

6767 MAUNA LOA BLVD.

SARASOTA, FL 34241

SIGNATURE: DANNIE S. JOHNSON **PRES** 01/17/2006