FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 03 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (5)598228 **ENNEVOR POOL CORPORATION** Principal Place of Business Mailing Address 12754 COCOA PINE DR 12754 COCOA PINE DR SUITE 206 BOYNTON BCH FL 33436 DO NOT WRITE IN THIS SPACE **BOYNTON BCH FL 33436** 3. Date Incorporated or Qualified 12/14/1978 2. Principal Place of Business 2a. Mailing Address Applied For 26 59-1872516 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Added to Fees 28 Trust Fund Contribution Country Zip Country This corporation owes or has paid the current year Intangible Yes □ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ENNEVOR, DANIEL A 12754 COCOA PINE DR Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BCH FL 33436** 84 City Zip Code 85 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. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 11 TITLE ☐ Change ☐ Addition ENNEVOR, DANIEL A NAME 1.2 NAME 12754 COCOA PINE DR STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BCH FL** CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 2.1 TITLE NAME ENNEVOR, BEVERLY 2.2 NAME 12754 COCOA PINE DR STREET ADDRESS 2.3 STREET ADDRESS **BOYNTON BCH FL** CATY-ST-ZIP 2.4 CITY - ST-ZIP DELETE ☐ Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 6.1 TITLE TITLE

> 6.2 NAME 6.3 STREET ADDRESS

14. Thereby certify that the information supplied with this filling 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 frue 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 intachment with an address.

(56) 498-5077

3/3/198

STREET ADDRESS CITY-ST-7IP

SIGNATURE: