

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 616020

FILED  
Apr 07, 2003  
Secretary of State

Entity Name: CYPRESS POOL SERVICE, INC.

**Current Principal Place of Business:**

2471 SE 12TH ST  
POMPANO BEACH, FL 33062 US

**New Principal Place of Business:**

**Current Mailing Address:**

2471 SE 12TH ST  
POMPANO BEACH, FL 33062 US

**New Mailing Address:**

FEI Number: 59-1900155

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOWDEN, DOUGLAS H.  
2471 SE 12TH ST  
POMPANO BCH, FL 33062 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BOWDEN, DOUGLAS H,  
Address: 2471 SE 12 ST  
City-St-Zip: POMPANO BEACH, FL

Title: STD ( ) Delete  
Name: BOWDEN, SUSAN E,  
Address: 2471 SE 12TH ST  
City-St-Zip: POMPANO BEACH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: SUSAN E. BOWDEN

STD

04/07/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date