

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000038513

FILED
Jan 07, 2009
Secretary of State

Entity Name: ANASTASIA POOL SERVICE, INC.

Current Principal Place of Business:

243 ORCHIS ROAD
SAINT AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

243 ORCHIS ROAD
SAINT AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 59-3574747 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PERKINS, ROGER H
Address: 243 ORCHIS ROAD
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: VP () Delete
Name: PERKINS, ROGER H
Address: 243 ORCHIS ROAD
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: VP () Delete
Name: RAYNE, CATHARINE
Address: 243 ORCHIS RD
City-St-Zip: SAINT AUGUSTINE, FL 32086

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: RAYNE, CATHARINE
Address: 243 ORCHIS RD
City-St-Zip: SAINT AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: ROGER PERKINS

PD

01/07/2009

Electronic Signature of Signing Officer or Director

_____ Date