## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 386708

(2)

Mailing Address

PINGEL POOLS, INC.

Principal Place of Business

**FILED** May 05 1997 8:00am Secretary of State

|--|--|

10506 SPRING HILL DR. SUITE A SPRING HILL FL 34606 US			10506 SPRING HILL DR. SUITE A SPRING HILL FL 34608-5046 US				:	3. Date Incorporated or C 08/10/1971	Qualified		e of Last 1/1996	Report
·	lace of Business	2a. Mailing Address					4. FEI Number		·		Applied For	
	SPRING HIL	26 10500 SPRING HILL DR					59-1395825			. [ [	Vot Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required						
City & State		City & State					6. Election Campaign Fina	ancing		\$5.0	0 May Be	
77.1	HILL, H	<sup>7</sup> L	28 SPRING HILL, FL				Trust Fund Contribution					
Zip	C	Zip					8. This corporation has lia	bility for in	tangible t	ax under	s. 199.032,	
24 34608		IERNANDO	29 34608 30 HERNANDO				Florida Statutes 🔀 Yes 🔲 No					
		ddress of Current	Registered Agent					<ol><li>Name and Address of</li></ol>	New Reg	istered A	gent	
	ay, <b>r</b> obert				81	Name	:	•				
	' applegate df				82	Street	Address	(P.O. Box Number is Not	Acceptable	n)		
8PRI	ing Hill, Florii	DA			-	Olibor	71001033	() .O. DOX HAMIDON IS (NOT)	roccinain	,		
SPRING HILL FL 34606					83					-		
					84	City				FL	<b>85</b> Zip	Code
15 Purcuant t	to the provisions of	Sections 607 0502	and 607.1508, Florida Statut	los tho s	<u></u>	nomad	d oornord	ian pubraita thin atatamani	1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			the section is a
Office of re	egistered agent, or	both in the State o	f Florida, Such change was ons of, Section 607.0505, Fl	authorize	ed by	r the con	rporation's	s board of directors. I here	by accept	the appo	intment a	its registered is registered
	Signature, typed or printe	d name of registareo agent	and the if applicable (NOT			ent signature	e required wi	nen reinstating)		DATE	· · · · · · · · · · · · · · · · · · ·	
12.		OFFICERS AND		13.				ADDITIONS/CHANGES	TO OFFICE	RS AND	DIRECTO	RS IN 12
TITLE	P	_	[] DELETE	111	ITLE					1	Change	Addition
NAME	LAVAY, ROBER			12 N	IAME							
STREET ADDRESS			13		13 STREET ADDRESS							
CITY-ST-ZIP	SPRING HILL FL			14 CITY-ST-ZIP								
TITLE	TD	_	☐ DELETE	21 T	TLE					l	Change	Addition
NAME	LAVAY, LIONEL G.		2.2 N/		2.2 NAME							
STREET ADDRESS				2.9 STREET ADDRESS								
City-St-ZIP	SPRING HILL F	L 33526		2.40	CITY-S	SI - ZIP						
TITLE	D	_	☐ DELETE	3.1 T	TLE					]	Change	Addition
NAME	LAVAY, ROBER			3.2 N	3MAI							
STREET ADDRESS	2505 S.E. CAR	ROLL ST.		3.3 S	TREET	ADDRESS						
CITY-ST-ZIP	STUART FL			3,4, 0	OHY - 5	31 - 21P						
TITLE			DELFTE	4.1 ĭ	ITLE						Change	Addition
NAME				4. 2 1	NAME							]
STREET ADDRESS				4.3 S	TREE 1	ADDRESS						
CITY-ST-ZIP				4.4 C	IIY-S	1 - ZIP	1					
TITLE			☐ DELFTE	5.1 T			1				Change	Addition
NAME				5.2 N	IAME							
STREET ADDRESS				5.3 S	TREFT	ADDRESS	ì					
CITY-ST-ZIP				5.4 C	ITY S	1 - 71P						
TITLE	- Ap			6.11		,		[ ] Cha			Change	Addition
NAME				6.2 N	IAME						·	ł
STREET ADDRESS				6.3 S	TREET	ADDRESS						1
CITY-ST-ZIP					11Y-S							
14. I do hereb	y certify that the in	formation supplied	with this filing does not quali	fy for the	exe	mplion s	stated in S	Section 119.07(3)(i), Florid	a Statutes.	I further o	certify that	it the
intormation	n indicated on this	ananual roport or eur	oplemental annual report is to be receiver or trustoe empow on an attachment with an add	uuo end	SACH	rata and	d that mu	cianatura shall have the e-	ama lanal .	affaal aa i	1 20000 1	ndar aath, that