

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2004 08:00 AM
Secretary of State

DOCUMENT # K57624	
1. Entity Name IHNEN POOLS, INC.	
Principal Place of Business 4901 US 1 UNIT L VERO BEACH, FL 32967 US	Mailing Address 4901 US 1 UNIT L VERO BEACH, FL 32967 US

U00000165404
07/12/04-80012-011 150.00



07012004 No Chg-P CR2E034 (10/03)

4. FBI Number 59-2934887	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent IHNEN, EDWARD 9330 85TH STREET VERO BEACH, FL 32967

**DO NOT WRITE
IN THIS SPACE**

7. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE Edward W. Ihnen **Edward W. Ihnen** 7-1-04
Signature, typed or printed name of registered agent and date if applicable (Printed Registered Agent signature required when renewing) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

8. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE DP	NAME IHNEN, EDWARD STREET ADDRESS 9330 85TH STREET CITY-ST-ZIP VERO BEACH, FL 32967
TITLE VP	NAME IHNEN, GARY STREET ADDRESS 172 CAPRONA AVE. CITY-ST-ZIP SEBASTIAN, FL 32958
TITLE ST	NAME IHNEN, BRIAN STREET ADDRESS 502 CITRUS AVE CITY-ST-ZIP SEBASTIAN, FL 32958
TITLE 	NAME STREET ADDRESS CITY-ST-ZIP
TITLE 	NAME STREET ADDRESS CITY-ST-ZIP
TITLE 	NAME STREET ADDRESS CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true 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 10 or Block 11 if changed, or on an attachment with an address, with all a has the empowered.

SIGNATURE: Edward W. Ihnen **Edward W. Ihnen** 7-1-04 (772) 569-2228
Signature and typed or printed name of signing officer or director Date Daytime Phone #