#### I hereby 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 all other like empowered. SECRETARY/TREASURER 03/14/2022

## SIGNATURE: ELIZABETH SHEA

Electronic Signature of Signing Officer/Director Detail

# 2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# F47103

Entity Name: NOFINER POOLS OF SEMINOLE COUNTY, INC.

### **Current Principal Place of Business:**

**102 CAMPHOR TREE LANE** ALTAMONTE SPRINGS. FL 32714

#### **Current Mailing Address:**

**102 CAMPHOR TREE LANE** ALTAMONTE SPRINGS. FL 32714 US

### FEI Number: 59-2191324

# Name and Address of Current Registered Agent:

SHEA, ELIZABETH **102 CAMPHOR TREE LANE** ALTAMONTE SPRINGS, FL 32714 US

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

# **Officer/Director Detail :**

Title	PD	Title	TD
Name	SHEA, DAVID D	Name	SHEA, ELIZABETH
Address	191 POINCIANA LANE	Address	102 CAMPHOR TREE LANE
City-State-Zip:	ENTERPRISE FL 32738	City-State-Zip:	ALTAMONTE SPRINGS FL 32714
Title	00		
Title	DS		
Title Name	DS SHEA, CAROL P		

### FILED Mar 14, 2022 Secretary of State 4360574076CC

Date

Certificate of Status Desired: No

Date