

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000106009

**Entity Name:** LEO JR. POOL SERVICE INC.

**Current Principal Place of Business:**

3553 PLOVER AVENUE  
NAPLES, FL 34117

**Current Mailing Address:**

3553 PLOVER AVENUE  
NAPLES, FL 34117 US

**FEI Number: 45-4057214**

**Certificate of Status Desired: No**

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

STRAUSS, PAUL R  
5041 32ND AVENUE SW  
NAPLES, FL 34116 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

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name STRAUSS, PAUL R  
Address 5041 32ND AVENUE SW  
City-State-Zip: NAPLES FL 34116

Title ST  
Name HERRERA, JESUS H  
Address 4730 15TH AVENUE SW  
City-State-Zip: NAPLES FL 34116

Title VP  
Name GARCIA, JULIO C  
Address 183 PRICE STREET  
City-State-Zip: NAPLES FL 34113

Title D  
Name HERRERA, MICHELLE R  
Address 4730 15TH AVE SW  
City-State-Zip: NAPLES FL 34116

Title D  
Name GARCIA, ANA D  
Address 183 PRICE ST  
City-State-Zip: NAPLES FL 34113

*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.*

**SIGNATURE: PAUL STRAUSS**

**PRESIDENT**

**03/20/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date