

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000045847

**Entity Name:** WAKULLA POOL AND SPA, INC.

**Current Principal Place of Business:**

208 JIM FRENCH ROAD  
CRAWFORDVILLE, FL 32327

**Current Mailing Address:**

POST OFFICE BOX 1438  
WOODVILLE, FL 32362

**FEI Number:** 59-3249862

**Certificate of Status Desired:** No

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

GERRELL, DEBORAH H  
208 JIM FRENCH ROAD  
CRAWFORDVILLE, FL 32327 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            GERRELL, GEORGE MARK  
Address        208 JIM FRENCH ROAD  
City-State-Zip: CRAWFORDVILLE FL 32327

Title            VP  
Name            GERRELL, DEBORAH H  
Address        208 JIM FRENCH ROAD  
City-State-Zip: CRAWFORDVILLE FL 32327

*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:** DEBORAH H. GERRELL

VP

04/08/2017

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

\_\_\_\_\_  
Date