

FILE-NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 209118

(9)

1. Corporation Name

NATIONAL POOL EQUIPMENT, INC.

FILED
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

95 FEB - 3 PM 1:49

Principal Place of Business

716 N W 7TH AVE
FT LAUDERDALE FL 33311

Mailing Address

716 N W 7TH AVE
FT LAUDERDALE FL 33311

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/16/1958

3a. Date of Last Report

02/03/1994

4. FEI Number

59-0829734

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIAMS, BARBARA
4220 S.W. 8TH STREET
PLANTATION FL 33317

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City

FL

05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Barbara M. Williams

(NOTE: Registered Agent signature required when reinstating)

DATE

1/31/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	WILLIAMS, MYRON C.
STREET ADDRESS	716 N.W. 7TH AVE.
CITY - ST - ZIP	FORT LAUDERDALE FL
TITLE	VD
NAME	WILLIAMS, MYRON S.
STREET ADDRESS	811 S.W. 31ST AVE.
CITY - ST - ZIP	FORT LAUDERDALE FL
TITLE	TD
NAME	WILLIAMS, BARBARA M.
STREET ADDRESS	4220 S.W. 8TH STREET
CITY - ST - ZIP	PLANTATION FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	BARBARA M WILLIAMS	☒ Change ☐ Addition
1.2 NAME	4220 SW 8th St	
1.3 STREET ADDRESS	PLANTATION FLA 33317	PRES
1.4 CITY - ST - ZIP		
2.1 TITLE	BARBARA M. WILLIAMS	☐ Change ☐ Addition
2.2 NAME	4220 SW 8th St	
2.3 STREET ADDRESS	PLANTATION FLA.	SAC
2.4 CITY - ST - ZIP		TREAS.
3.1 TITLE	EMMY PARKS	☐ Change ☐ Addition
3.2 NAME	1224 NE 17th TERRACE	VP
3.3 STREET ADDRESS	FT LAUD FLA 33304	
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Barbara M. Williams

1/31/95

463412

(PRINT NAME AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

(My Name)

"EVERYTHING FOR THE POOL BUT THE WATER"

Customer's
Order No. _____ Date _____ 19____

Address

Terms

All Claims And Returned Goods MUST Be Accompanied By This Bill.
The Federal Truth In Lending Law; Become Effective July 1, 1969 Under Our Terms Of Sale. Your Full Account Is Due And Payable Within 30 Days Of Invoice Date (A Finance Charge) Will Be Made On Past Due Balances. At A Rate Of 2% Per Month On All Past Due Balances All Legal Fees Shall Be Paid By Debtor.

SIGNATURE