

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 25, 2008 08:00 AM
Secretary of State

DOCUMENT # 275983	
1. Entity Name FLORIDA POOL CORPORATION	

Principal Place of Business 110 NE 32 COURT FORT LAUDERDALE FL 33334	Mailing Address 110 NE 32 COURT FORT LAUDERDALE FL 33334
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE	CR2E034 (10/07)
4. FEI Number 59-1143233	Applied For ☐ Not Applicable ☐

6. Name and Address of Current Registered Agent	
DE DON, RAUL R 180 N W 37TH ST FT LAUDERDALE FL 33309	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

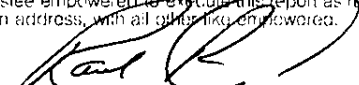
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE	DATE

FILE NOW!!! - FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	☐ Delete
NAME	P DE DON, RAUL R
STREET ADDRESS	180 N W 37TH ST
CITY- ST- ZIP	FT. LAUDERDALE FL
TITLE	☐ Delete
NAME	ST BLOSC, GRACE
STREET ADDRESS	209 N W 23RD ST
CITY- ST- ZIP	FT. LAUDERDALE FL
TITLE	☐ Delete
NAME	V DE DON, LINDA M.
STREET ADDRESS	180 N.W. 37TH STREET
CITY- ST- ZIP	FT. LAUDERDALE FL
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 other like empowered.	
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SIGNATURE:		RAUL R de DON	1-23-08	9545652165
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