## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 21 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

**SIGNATURE:** 

DOCUMENT # 324797

(0)

GULLY POOL SERVICE & SUPPLY, INC.

Principal Plac	e of Business	Mailing Address								
2757 FOWLER ST FORT MYERS FL 33901		2757 FOWLER ST FORT MYERS FL 33901-6321								
						3. Date Incorporated or Qualified 12/29/1967		ate of Las 24/1990		ort
<del></del>	face of Business	2a. Mailing Address			4. FEI Number Applied					
Suite, Apt	# etc	26 Sudo Apl # etc			<b>59-1198570</b> Not Applicable				<u></u>	
22	#, E(t.	Suste, Apt. #, etc.			5. Certificate of Status Desired Fee Required					
City & Stat	e	City & State								
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Country	Zip	Cou	ıntry		8. This corporation has liability for it	ntanalble			
24	25	29	30			Florida Statutes	Yes [	☐ No		
····	9. Name and Address of Curre	ent Registered Agent		ļ.,		10. Name and Address of New Reg	platered	Agent		*****
	NAC,DOROTHY K		81 Name							
	FOWLER ST		82 Street Add			dress (P.O. Box Number is Not Acceptab	le)			
FIN	AYERS FL 33901			83				<del></del>		<del></del>
				03						
				84	City		EI	85 2	ip Cod	de
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508, Florida Sta	tutes, the a	bove bove	-named cor	poration submits this statement for the p	urpose of	changir	a its re	egistered
office or r	registered agent, or both, in the Star im familiar with, and accept the obli	te of Florida. Such change wa	is authorize	d by	the corpora	ation's board of directors. I hereby accep	t the app	ointment	as reç	gistered
SIGNATURE		3	- 1011000 010		•					
	Signature, type dioxiprinted name of registence a		OTE: Registere	d Age	nt signature requ	ired when reinstating)	DATE			<del></del>
12.				13.		ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITLE	DP GULNAC, DON R	☐ DELETE	1.1 7					L Chan	ge L	Addition
NAME	2757 FOWLER ST		1.2 N							
STREET ADDRESS	FT MYERS, FL 00000				ADDRESS					
CITY - ST - ZIP TITLE	D	DELETE.	2.1 T	ITY - S1	T-ZIP			Chan		Addition
NAME	WILTSHIRE,WARREN B	ביין טוננניונ	2.1 II		ĺ			L.J. Criani	Je L	AUUIUUII
STREET ADDRESS	2757 FOWLER ST.				ADDRESS					
CITY - ST - ZIP	FT MYERS FL			IIY-S	i					
TiTL {	SDT	DELETE	317		· · · · · · · · · · · · · · · · · · ·			Chang	ge [	Addition
NAME:	GULNAC, DOROTHY K		32 N	AME						
STREET ADDRESS	2757 FOWLER ST.		335	TREET	ADDRESS					
CITY - ST - ZIP	FT MYERS FL		3.4.0	iTY-S	T-ZIP					
TITLE		☐ DELETE	4 1 T	TLE				Chang	ge [	Addition
NAME			4 2 N	IAME						
STREET ADDRESS			4.3 \$	raeer	ADDRESS					
CITY-ST-ZIP		D propie		ITY-SI	T-ZIP				<del></del>	
TITLE		☐ DELETE	51 Ti					Chang	je L	Addition
NAME OTREET ADDRESS:			52 N		1000560					
STREET ADDRESS					ADDRESS					
CITY - ST - ZIP TITLE		DELETE	5.4 C	TY-SI	1 - ZIP	**************************************		Chang	ne T	Addition
NAME		bud pecete	6.2 N					بالمالي لي	, L	ווייוווייים ב
STREET ADORESS			•		ADDRESS					
			0.53	ELI	- DOTIEGO					

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this arrival 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 direction 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 of Block 13 if changed, or on an attachment with an address.