2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 AM
Secretary of State

DOCUMENT# 324797

Entity Name: GULLY POOL SERVICE & SUPPLY, INC.

Current Principal Place of Business:

6644 MARIA DRIVE
SAINT JAMES CITY, FL 33956 US

New Principal Place of Business:

Current Mailing Address:

6644 MARIA DRIVE
SAINT JAMES CITY, FL 33956 US

New Mailing Address:

FEI Number: 59-1198570 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GUINAC, DOROTHY K
6644 MARIA DR
ST JAMES, FL 33956 US

Name and Address of New Registered Agent:

GULNAC, DOROTHY K
6644 MARIA DR
ST JAMES, FL 33956 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: DOROTHY K GULNAC 04/23/2002
Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: GULNAC, DON R,
Address: 6644 MARIA DR
City-St-Zip: ST JAMES CITY, FL 33956

Title: D ( ) Delete
Name: WILTSHIRE,WARREN B,
Address: 4 GEORGETOWN
City-St-Zip: FT MYERS, FL 33901

Title: SDT ( ) Delete
Name: GULNAC, DOROTHY K
Address: 6644 MARIA DR
City-St-Zip: ST JAMES CITY, FL 33956

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DOROTHY K GULNAC D 04/23/2002
Electronic Signature of Signing Officer or Director Date