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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STA

Sandra B. Morthem ,

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT#-336923

LAGASSE POOL CONSTRUCTION COMPANY						
Principal Place of Business Mailing Address					·	
	EST BROWARD BLVD. AUDERDALE FL 3331	SAME				
					3. Date Incorporated or Qualified 10/24/68	3a. Date of Last Report 1996
─ ┐ `	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
Suite, Apt	# olc	Suite, Apt. #, etc.			59-1223374	Not Applicabl
22	#. o.c.	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	le .	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zıp	Country	Zıp	Country		8. This corporation has liability for in	
24	25	29	30			Yes 🗌 No
	9. Name and Address of Current F	Registered Agent	04 1		10. Name and Address of New Reg	gistered Agent
WILL	IAM G. LAGASSE' JI	R.	81 Na	me	8	
5026 NW 47TH AVENUE COCONUT CREEK FL 3307		··•	82 Str	eot Addres	ess (P.O. Box Number is Not Acceptable)	
		3	83			
		-				
			84 Cit	У		FL 85 Zip Code
11. Pursuant office or re	to the provisions of Sections 607.0502 a	and 607.1508, Florida Stat Florida, Such change was	tutes, the above-nar	ned corpor	ation submits this statement for the pu	urpose of changing its registered
agent. I a	egistered agent, or both, in the state of im familiar with, and accept the obligation Signature typed or printed name of registered agent a	Florida, Such change was ons of, Section 607.0505, I	s authorized by the Florida Statutes Oth Registered Agent sign	corporation	n's board of directors. I hereby accept when reinstaing)	t the appointment as registered
SIGNATURE	egistered agent, or both, in the State of im familiar with, and accept the obligation Signature typed or printed name of registered agent a OFFICERS AND I	Florida, Such change was ons of, Section 607.0505, I ard lite if applicable (NO DIRECTORS	s authorized by the Florida Statutes OTHER gistered Agent sign 13.	corporation	i's board of directors. I hereby accept	t the appointment as registered DATE ERS AND DIRECTORS IN 12
SIGNATURE 12.	egistered agent, or both, in the state of im familiar with, and accept the obligation of separation by the obligation of the state of the obligation of the	Florida. Such change was ons of, Section 607.0505, the distribution of the distributi	s authorized by the Florida Statutes O11 Registered Agent sign 13. 1.1 TILE	corporation	n's board of directors. I hereby accept when reinstaing)	t the appointment as registered
SIGNATURE 12. TITLE NAME	Signature typed or printed name of registered agent a OFFICERS AND I PRESIDENT & DIRECT WILLIAM G. LAGASS	Torida. Such change was one of, Section 607.0505, to and later Hampheable (NECTORS) CTOR DELTIE SE' JR.	s authorized by the Florida Statutes OTHER pistered Agent sign 13. 1.1 THE 1.2 NAME	corporation	n's board of directors. I hereby accept when reinstaing)	t the appointment as registered DATE ERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature typed or protect name of registered agent a OFFICERS AND TO PRESIDENT & DIRECT WILLIAM G. LAGASS 5026 NW 47TH AVEN	Torida. Such change was ons of, Section 607.0505, to section 607.0505, t	s authorized by the Florida Statutes OTE Registered Agent sign 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRE	corporation	n's board of directors. I hereby accept when reinstaing)	t the appointment as registered DATE ERS AND DIRECTORS IN 12
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I To nereby 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 armuel report or supplemental annual report is frue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or directory indicated in 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 slock 3 if charged, or on an attachment with an address.

SIGNATUR

CHATHER AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/5/97

(954) 587-1000

Daytime Phone

FILED

May 14 1997 8:00am

Secretary of State