2002 UNIFORM BUSINESS REPORT (UBR)

2002	2 UNII	FOR	M BUSIN	IESS REPO	DRT	(UBR	R)	_	F	ILE]	D ₂	•
DOCUMENT # 405580								Jan 16, 2002 8:00 am Secretary of State				
VILLAGE	POOLS,	INC.							01-16-2002			
Principal Place of Business Mailing Address 6918 CYPRESS RD PLANTATION FL 33317-9905 US Mailing Address 6918 CYPRESS RD PLANTATION FL 33317-99 US					9905	 		1 00 811 	HARI AANDI ANAL UKAT NO	11 88 11 913 11 811	il bibil 4/bi l 1	KIRKI BIRAL FRÖL
2. Principal P	lace of Busin	ess		3. Mailing Address	-,							
Suite, Apt.	#, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State				City & State				4. FEI Number S9-1427270 Applied For Not Applicable				
Zip Country			у	Zip	try	5. Certificate of Status Desired					ditional	
	6. Name	and Add	ress of Current Re	gistered Agent	· ·			7. Name and /	Address of New Re			
Name							Pand	dora Miller				
MILLER, PANDORA 310 NW 65TH TERR.						Street Address (P.O. Pox Number is Not Acceptable)						
PLANTATION FL 33317							Tast	0.00				
•						City	West			FL	Zip Cod	7
8. The above	named entity	submits	this statement for th	e purpose of changing i	ts registere	ed office or	registered	d agent, or both	n, in the State of Flo	rida.	·	
SIGNATURE.	Signature, typed	or printed na	ne of registered agent and	title if applicable. (NC	OTE: Registere	d Agent signatur	re required wi	hen reinstating)		DATE		
Tax filing r		ble to sat	isfy its Intangible	FILE NOW After May 1, 2 Make Check Paya	002 Fee	will be \$5	50.00	Trus	stion.Campaign Fina st Fund Contribution			May Be
11.			OFFICERS AND DIF	RECTORS	12.			ADDITIONS/0	CHANGES TO OFFI	CERS AND I	DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD MILLER, J 310 N.W. PLANTATI	65TH TE	ERRACE	☐ Delete			1391		dio Drive		Change	☐ Addition
TITLE . NAME STREET ADDRESS CITY-ST-ZIP	VSD MILLER, F 310 N.W. PLANTATI	ANDOR 65TH TE	A J. ERRACE	☐ Delete		l l	VSD Mil		ndora J. dio Drive		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		I	West	ton, FL	33327		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		I			**	•	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS				☐ Delete		et address					Change	Addition
TITLE NAME				☐ Delete	TITLE	I	-				☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP				COL. 1	CITY	-ST-ZIP	-4: 0		mada ord	£	د علم علم ا	oformation.
indicated of the cor	on this repor	t or supplie receive	emental report is tru r or trustee empowe	is filing does not qualify to be and accurate and that ered to execute this repo to all other like empowere	t my signal irt as requi	ture shall ha	ave the sa	me legal effect	as if made under o	ath; that I ar	n an officer	or director

SIGNATURE: _