SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

Secretary of State

FILED

Aug 20 1998 8:00am

1	MÊNT # 472569 P oo ls and spas, inc.	(3)				
APOLLO	POLS AND SPAS, INC.				TERRITORIA DE LA CORRECCIONA DE LA CORR	.
Principal Plac	e of Rusiness	Mailing Address				(#19 11 #1911 #1911 #1911 #1911 #1911
1325 E NORVELL BRYANT HWY 8159 E. RIVER RD.						
HERNANDO FL 34442 HERNANDO FL 32642-2443			3			
US	-				DO NOT WRITE IN TH 3. Date Incorporated or Qualified	IS SPACE
					03/26/1975	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21		26		59-1585250	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zlp	Country	Zip	Zip Country		8. This corporation owes or has paid the co	urrent year Intangible
24	9. Name and Address of Curren	t Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
BRANTLEY, ANNE J.				Name	To. Maine and Address of New Registers	a Adent
6159 E. RIVER ROAD			82	82 Street Address (P.O. Box Number is Not Acceptable)		
HERNANDO FL 34442			83			
			84	City		Test 70 Code
				City	F	L 85 Zip Code
11. Pursuant office of	t to the provisions of sections 607,0502 registered agent, or both, in the State am familiar with, and accept the obligations.	2 and 607.1508, Florida Statute of Florida. Such change was aligns of section 607.0506. Fl	es, the above authorized by	-named corpo the corporati	viation submits this statement for the purpose of ion's board of directors. I hereby accept the app	changing its registered ointment as registered
SIGNATURE	an juninal will, and accept no obligi					
12.	Signature, typed or puriled name of registered ager		OTE: Registered ,	Agent signature req	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS /	AND DIDECTORS IN 42
TITLE	OFFICERS AND DIRECTORS DELETE		1.1 TITLE	 -	ADDITIONS/CHANGES TO OFFICERS /	Change Addition
NAME	ANNE J. BRANTLEY		1.2 NAME			Change Address
STREET ADDRESS	A code on the company and the		1.3 STREET ADDRESS			l
CITY-ST-ZIP	HERNANDO FL		1.4 CITY-ST-ZIP			
TITLE	P DELETE		2.1 TITLE			Change Addition
NAME	BRANTLEY, CHRIS L		2.2 NAME			
STREET ADDRESS	1 1104		2.3 STREET ADDRESS			
CITY-ST-ZIP	CRYSTAL RIVER FL		2.4 CITY-S	T-ZIP	<u></u>	
TITLE NAME	LOYD D. BRANTLEY		3.1 TITLE 3.2 NAME	}		Change Addition
STREET ADDRESS			3.3 STREE	ADDRESS		
CITY-ST-ZIP	I I I I I I I I I I I I I I I I I I I		3.4 CITY-S			
TITLE	DELETE		4.1 TITLE			Change Addition
NAME		4		1		
STREET ADDRESS			4.3 STREET ADDRESS			}
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME	1		5.2 NAME			Ì
STREET ADDRESS	•		5.3 STREET	1		
CITY-ST-ZIP TITLE			5.4 CITY-S 6.1 TITLE	T-Z/P		
NAME		L DELETE	6.2 NAME			Change Addition
STREET ADDRESS			6.3 STREE	ADORESS		
CITY-ST-ZIP	<u>.</u>		6.4 CITY-S	1		
	ertify that the Information supplied with	this filing does not qualify for t			tion 119.07(3)(i), Florida Statutes. I further certify	that the information

Indicated on this affinual report or supplied with this filling does not quality for the exemption stated in section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this affinual 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 director of the corporation or the receiver printstee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

IGNATURE:

(352) 726-32

SIGNATURE:

(352) 726-3224