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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 484682

(0)

MERMAID POOLS, INC.

FILED						
May 05 1997 8:00am						
Secretary of State						

Principal Place	e of Business	Mailing Address			11811 81811 01811 01811 01811 0181 1881
10508 SPRING HILL DR SUITE A SPRING HILL FL 34808 US		10506 SPRING HILL DR SUITE A SPRING HILL FL 34608-5046 US			
				3. Date Incorporated or Qualified 09/18/1975	3a. Date of Last Report 05/01/1996
<del></del>	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 10500 SPRING HILL DR		26 10500 SPRING	HILL DR	59-1395825	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		6. Election Campaign Financing	Fee Required
23 SPRING HILL		28 SPRING HILL		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip 34608	Country	8. This corporation has liability for in	
24 34608	25 HERNANDO	1291	30 HERNANDO	Florida Statutes	]Yes □ No
200	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Rec	jistered Agent
	ERT LAVAY				
	' applegate drive Ing Hill, florida		82 Street Add	fress (P.O. Box Number is Not Acceptab	le)
	ING HILL, FLURIDA ING HILL FL 34606		83		
VI 14	ING THEE 1 E OTOGO				
			84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statuto	es, the above-named corp	poration submits this statement for the pr	urpage of changing its registered
agent. I a	egistered agent, or both, in the State ( m familiar with, and accopt the obliga	of Florida. Such change was a tions of, Section 607.0505, Flo	uthorized by the corpora- orida Statutes.	tion's board of directors. I hereby accep	I the appointment as registered
SIGNATURE		· · · · · · · · · · · · · · · · · · ·			
12,	Signature, typed or printed name of registered agen OFFICERS AND		Fingistered Agent's gnature requi	ited when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE
TITLE	TD OFFICERS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	LAVAY LIONAL G	<u> </u>	1.2 NAME		La ontango La cidanion
STREET ADDRESS	8123 AVE. OFTHE PALMS		1.3 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL, FL 33526		1.4 CITY-ST-ZIP		
TeTLE	PD	DELETE	2.1 TITLE		Change Addition
NAME	LAVAY ROBERT		2.2 NAME		
STREET ADDRESS	6047 APPLEGATE DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL FL 00000	OFFICE	2.4 C(TY - S1 - Z)P		
TITLE	D Lavey, Robert	☐ DELETE ,	3 1 TIILE		Change Addition
NAME STREET ADDRESS	2505 S. E. CARROLL ST.		3.2 NAME		
	STUART FL		3.3 STREFT ADDRESS		
CITY-ST-ZIP TITLE	OTOMIC IC	DELETE	3.4. CHY-S1-ZIP 4.1 TITLE		Change Addition
NAME			4. P NAME		La Citaligo La Figurio.
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CHY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
RAME			5.2 NAME		
STREET ADDRESS			5.3 STHEET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - 7/P		
TITLE		L DELETE	61 TITLE		Change Addition
NAME .			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
14. I do hereb	ov certify that the information supplied	with this filing does not qualify	64 CiTY-ST-ZIP	d in Section 119.07(3)(i), Florida Statutes	Liberthon contifue that the
intormation Lam an of	n indicated on this afinital report or su	applemental annual report is tru The receiver or trustee empowe	ue and accurate and that ered to execute this repor	t my signature shall have the same legal ort as required by Chapter 607, Florida St	effect as if made under oath: that