2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 491389

Entity Name: FLORIDA POOLS OF CENTRAL FLORIDA, INC.

FILED Dec 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1123 SEMINOLA BLVD 283 WHITCOMBE CT.

CASSELBERRY, FL 32707 US LONGWOOD, FL 32779 US

Current Mailing Address: New Mailing Address:

1123 SEMINOLA BLVD 283 WHITCOMBE CT.

CASSELBERRY, FL 32707 US LONGWOOD, FL 32779 US

FEI Number: 59-1683340 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BURKE, JAMES M.

BURKE, JAMES M PRESIDE

1123 SEMINOLA BLVD.

CASSELBERRY, FL 32707 US

BURKE, JAMES M PRESIDE

283 WHITCOMBE CT.

LONGWOOD, FL 32779 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: JAMES M. BURKE 12/02/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete

 Name:
 BURKE, JAMES M.

 Address:
 283 WHITCOME COURT

 City-St-Zip:
 LONGWOOD, FL 32779

 Title:
 VT
 (X) Delete

 Name:
 LYNDA FELDMAN

 Address:
 441 WHISPERING OAK LN

 City-St-Zip:
 APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BURKE, JAMES M PRESIDE
Address: 283 WHITCOMBE COURT
City-St-Zip: LONGWOOD, FL 32779 US

Title: () Change () Addition

Name: Address: Citv-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JAMES M. BURKE PRES 12/02/2009