

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 497162

FILED  
Mar 20, 2006  
Secretary of State

Entity Name: ARTESIAN POOLS, INC.

## Current Principal Place of Business:

7347 E. COLONIAL DRIVE  
ORLANDO, FL 32807

## New Principal Place of Business:

7347 E. COLONIAL DRIVE  
ORLANDO, FL 32807 US

## Current Mailing Address:

7347 E. COLONIAL DRIVE  
ORLANDO, FL 32807

## New Mailing Address:

7347 E. COLONIAL DRIVE  
ORLANDO, FL 32807 US

FEI Number: 59-1654056

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COOPER, ALAN  
215 CHURCHILL DR  
LONGWOOD, FL 32779 US

## Name and Address of New Registered Agent:

COOPER, WILLIAM K  
1710 PROSPECT AVE  
ORLANDO, FL 32814 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: WILLIAM K COOPER

03/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: COOPER, ALAN I  
Address: 938 SWEETGUM VALLEY PEACE  
City-St-Zip: LAKE MARY, FL 32746

Title: VSD ( ) Delete  
Name: SALISBURY, JANIE,  
Address: 1233 GRAN PASEO DRIVE  
City-St-Zip: ORLANDO, FL

Title: PRES ( ) Delete  
Name: COOPER, WILLIAM K.,  
Address: 8530 MILANO DR. APT 2121  
City-St-Zip: ORLANDO, FL 32810 US

Title: V (X) Delete  
Name: METTS, VICKY,  
Address: 1760 WILLA CIR  
City-St-Zip: WINTER PARK, FL 32792 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: COOPER, ALAN I MR  
Address: 938 SWEETGUM VALLEY PEACE  
City-St-Zip: LAKE MARY, FL 32746 US

Title: VP (X) Change ( ) Addition  
Name: METTS, VICKY L MS  
Address: 1760 WILLA CIR  
City-St-Zip: WINTER PARK, FL 32792 US

Title: PRES (X) Change ( ) Addition  
Name: COOPER, WILLIAM K MR  
Address: 1710 PROSPECT AVE  
City-St-Zip: ORLANDO, FL 32814 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: VICKY METTS

VP

03/20/2006

Electronic Signature of Signing Officer or Director

Date