

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 503957

FILED
Jan 19, 2009
Secretary of State

Entity Name: ARTESIAN POOLS OF EAST FLORIDA, INC.

Current Principal Place of Business:

762 S NOVA RD
DAYTONA BEACH, FL 32114 US

New Principal Place of Business:

Current Mailing Address:

762 S NOVA RD
DAYTONA BEACH, FL 32114 US

New Mailing Address:

FEI Number: 59-1808034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LENOIS, ROY R JR
762 NOVA RD
DAYTONA BCH, FL 32114 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: LENOIS, JOAN
Address: 9 VENETIAN CIR
City-St-Zip: PT ORANGE, FL

Title: CEO () Delete
Name: LENOIS, ROY R JR.
Address: 9 VENETIAN CIRCLE
City-St-Zip: PORT ORANGE, FL

Title: PD () Delete
Name: LENOIS, BRIAN
Address: 6236 YELLOWSTONE DRIVE
City-St-Zip: PORT ORANGE, FL 32127

Title: VP () Delete
Name: BLANTON, JOHN W III
Address: 308 BRIDLE PATH LANE
City-St-Zip: ORMOND BEACH, FL 32164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
Address:
City-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: BRIAN R. LENOIS

PD

01/19/2009

Electronic Signature of Signing Officer or Director

Date