

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **542029** (4)
1. Corporation Name
ISLANDER'S POOL & MAINTENANCE SERVICE, INC.



Principal Place of Business
**P.O. BOX 11858
FT. LAUDERDALE FL 33339**

Mailing Address
**P.O. BOX 11858
FT. LAUDERDALE FL 33339**

3. Date of Incorporation or Qualification 08/03/1977	3a. Date of Last Report 02/01/1995
4. FEI Number 59-1806457	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

**MAC DONALD, ELMER D
1995 NE 62ND ST
FT. LAUDERDALE FL 33308**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

11. Pursuant to the provisions of Sections 607.0802 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby, I accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0804, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director or Officer

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	MACDONALD, ELMER D	
STREET ADDRESS	5821 N.E. 21ST TERR.	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	
TITLE	ST	☐ DELETE
NAME	MACDONALD, LOIS N	
STREET ADDRESS	5821 N.E. 21ST TERR.	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	
TITLE	V	☐ DELETE
NAME	SHERMAN, FREDERICK IV	
STREET ADDRESS	311 S.E. 7TH ST.	
CITY-ST-ZIP	POMPANO BCH. FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14. TITLE	☐ Change ☐ Addition
15. NAME	
16. STREET ADDRESS	
17. CITY-ST-ZIP	☐ Change ☐ Addition
18. TITLE	
19. NAME	
20. STREET ADDRESS	
21. CITY-ST-ZIP	☐ Change ☐ Addition
22. TITLE	
23. NAME	
24. STREET ADDRESS	
25. CITY-ST-ZIP	☐ Change ☐ Addition
26. TITLE	
27. NAME	
28. STREET ADDRESS	
29. CITY-ST-ZIP	☐ Change ☐ Addition
30. TITLE	
31. NAME	
32. STREET ADDRESS	
33. CITY-ST-ZIP	☐ Change ☐ Addition
34. TITLE	
35. NAME	
36. STREET ADDRESS	
37. CITY-ST-ZIP	☐ Change ☐ Addition
38. TITLE	
39. NAME	
40. STREET ADDRESS	
41. CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied within this filing is voluntary, furnished and does not qualify for the exemption stated in Section 119.073(6), Florida Statutes. I further certify that the information indicated on this annual 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 its predecessor or trustee, employee or to exclude 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.

SIGNATURE:

Elmer D Macdonald
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

\$ 15'96

305-9913111

CR2E034 (12/95)