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

FILED Mar 12 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (2)588834 EDAM POOL STORES, INC. Principal Place of Business Mading Address 7816 W. SAMPLE RD. 7816 W. SAMPLE RD. CORAL SPRINGS FL 33065-4710 CORAL SPRINGS FL 33065-4710 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/09/1978 4. FEI Number Principal Place of Business 2a. Mailing Address Applied For 26 59-1859875 Not Applicable Suite Apt # etc. Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Zip Country Country Zip 8. This corporation owes or has paid the currentyear Intangible 24 25 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GELLERT, ARNOLD D. 7816 W. SAMPLE RD. 82 Street Address (P.O. Box Number is Not Acceptable) CORAL SPRINGS, FL LACEL 33065 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or peoled name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 DILE Change Addition TITLE GELLERT, ARNOLD D. NAME 1.2 NAME 8557 NW 1ST ST STREET ADDRESS 1.3 STREET ADDRESS CORAL SPRINGS FL 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE NAME O'CONNELL, DAVID C. 2.2 NAME 8873 NW 2ND ST STREET ADDRESS 2.3 STREET ADDRESS CORAL SPRINGS FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE O'CONNELL, ELIZABETH 3.2 NAME NAME 8873 NW 2ND ST STREET ADDRESS 3.3 STREET ADDRESS **CORAL SPRINGS FL** 3.4. CITY+ST-ZIP CITY-ST-ZIP Change TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP Change Addition DELETE TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITL F

4. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed as my an attachment with an address. Arnold DE Mert Pres. 1/19/94 SIGNATURE:

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-7IP