2007 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Jan 29, 2007 08:00 AM Secretary of State **DOCUMENT #611961** 1. Entity Name BLUE POOLS, INC. Mailing Address Principal Place of Business POST OFFICE BOX 14777 513 U.S. HWY. 1 SUITE 214 NORTH PALM BEACH, FL 33408 US NORTH PALM BEACH, FL 33408 01222007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1890329 Not Applicat \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent BELL, JERRY Y DO NOT WRITE 513 U.S. HWY1 **SUITE 214** IN THIS SPACE N. PALM BEACH, FL 33408 8. 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. I am familiar with, and eccept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE U00000608187 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 01/31/07-80067-013 150.w Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PD TITLE NAME BELL, JERRY Y. STREET ADDRESS 513 US HWY 1 STE 214 CITY-ST-ZIP NORTH PALM BEACH, FL VST TITLE NAME BELL, JOANNE H STREET ADDRESS 15269 -77TH TRL N. PALM BEACH GARDENS, FL 33418 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

FICER OR DIRECTOR