

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 654488

1. Corporation Name
FLORIDA POOL PRODUCTS, INC.

Principal Place of Business
14480 62ND ST. NO.
CLEARWATER FL 34620-2721

Mailing Address
P O BOX 6025
CLEARWATER FL 34618
US

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90170 037 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/01/1980

4. FEI Number

59-2096824

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 owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

MCLEAD, KAREN S
14480 62ND STREET NORTH
CLEARWATER FL 33760

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEOD
THOMAS, FRED A.
14480 - 62ND ST., N.
CLEARWATER FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
MCLEAD, KAREN S
14480 62ND ST N
CLEARWATER FL 33760

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
THOMAS, JOHN C.
14480 62ND STREET, NORTH
CLEARWATER FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
EISCH, JAMES P.
14480 - 62ND ST., N.
CLEARWATER FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DOE, JANET THOMAS
919 POWELL CT
COSTA MESA CA

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☒ Addition

33760

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☒ Addition

33760

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☒ Addition

33760

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby 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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Karen S. McLead

Date

Daytime Phone #

4/27/99 (727) 531-8913

CR2E034 (11/98)