

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01911

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** ALL SEASONS POOL SERVICE, INC.

**Current Principal Place of Business:**

185 E. AIRPORT BLVD  
SANFORD, FL 32773

**New Principal Place of Business:**

**Current Mailing Address:**

185 E. AIRPORT BLVD  
SANFORD, FL 32773

**New Mailing Address:**

**FEI Number:** 59-2038562

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WATTS, JOHN N  
185 E. AIRPORT BLVD  
SANFORD, FL 32773 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:** PD  
**Name:** WATTS, JOHN N  
**Address:** 1355 BRIGHAM LOOP  
**City-St-Zip:** GENEVA, FL 32732

**Title:** STD  
**Name:** WATTS, DIANE PATRICIA  
**Address:** 1355 BRIGHAM LOOP  
**City-St-Zip:** GENEVA, FL 32732

**Title:** VP  
**Name:** WATTS, DIANE PATRICIA  
**Address:** 1355 BRIGHAM LOOP  
**City-St-Zip:** GENEVA, FL 32732

I hereby 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 all other like empowered.

**SIGNATURE:** DIANE P WATTS

STD

01/06/2010

Electronic Signature of Signing Officer or Director

Date