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**

Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90086 029 ***150.00

DOCUMENT # F13693

1. Corporation Name

MARCO POOL & SOLAR CENTER, INC.

Principal Place	of Business	Mailing Address		·	(1001)00 (idt 11640 tille dille tille 1215 men bien eren bien eren eren eren eren
761 ELKCAM CI	RCLE EAST	% W.D. KRAMER			
MARCO ISLAND		4838 40TH TERRACE SE			DO NOT WRITE IN THIS SPACE
US		NAPLES FL 34116			3. Date Incorporated or Qualifed
		U3			·
		To Malling Address			01/01/1981 4. FEI Number Applied For
<u> </u>	ace of Business	2a. Mailing Address	_		59-2058718 Not Applicable
21		26 C/O Gary J. Hausler Suite Apt #, etc.			\$8.75 Additional
Suite, Apt. #, etc.		27 950 N. Collier Blvd. #202			1 5 Certificate of Status Desired 1 1
City & State		City & State			& Floation Compaign Financing \$5.00 May Po
		⊢ ′			Trust Fund Contribution Added to Fees
Zip Country		28 Marco Island, FI. Zip Country			8. This corporation owes the current year Intangible
Zip 34]		34145 30		llier	Personal Property Tax.
24 341	9. Name and Address of Current	23	1 003		10. Name and Address of New Registered Agent
	5. Name and Address of Current	Registered Agent	8	1 Name	
KRAMER, WILLIAM D					GARY J. HAUSLER, ESQ.
1838 40TH TERRACE SW		•	18	2 Street A	t Address (P.O. Box Number is Not Acceptable) 950 N. Collier Blyd. #202
NAPLES FL 34116			8	3	750 N. COTTLET DIVU. #202
			ا ا		
į		/	8	4 City	Marco Island FL 85 Zip Code = 34145
		1 2007 1500 51 110 572 600	*50.050	10 00 00 00 00 00 00 00 00 00 00 00 00 0	Marco Island FL 34145
11. Pursuant office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o	of Florida. Such change was auth	orized b	y the corpo	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0665, Florida	a Statute	es.	2/0/96
SIGNATURE		War.	_		<u> </u>
	Signature, typed or printed name of registered agent OFFICERS ANI		gistered Ag	gent signature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PT OFFICERS ANI	D DIRECTORS/	1.5 TITLE		Change Addition
TITLE		0 - 5222.2	1.2 NAMI	i	
(NAME	O'NEILL, TIMOTHY P				
STREET ADDRESS	1405 BUTTERFIELD COURT			ET ADDRESS]
CITY-ST-ZIP	MARCO ISLAND FL 34145	□ DELETE	1.4 CITY		Change MAddition
TITLE	V	□ pere⊥c	2.1 TITLE	1	Secutary Change MAddition
NAME	O'NEILL, PETER L		2.2 NAM	- 1	,·
STREET ADDRESS	1405 BUTTERFIELD COURT			ET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL 34145	FA DELETE		/-ST-ZIP	Change Addition
TITLE	3	DELETE	3.1 TITLE	1	
NAME	NEWTON, THOMAS		3.2 NAM	1	
STREET ADDRESS	1924 ROSEMARY LANE			EET ADDRESS	,
CITY-ST-ZIP	-NAPLES FL 34103			'-ST-ZIP	☐ Change ☐ Addition
TITLE	· .	☐ DELETE	4.1 TITLE	<u> </u>	Change
NAME			4. 2 NAM	Æ	1
STREET ADDRESS			4.3 STR	EET ADORESS	s
CITY-ST-ZIP		·	4.4 CITY	-ST-ZIP	
TITLE	•	☐ DELETE	5.1 TITLI		☐ Change ☐ Addition
NAME			5.2 NAM	Ĕ	
STREET ADDRESS			5.3 STR	EET ADDRESS	S
CITY-ST-ZIP				-ST-ZIP	
TITLE		☐ DELETE	6.1 TITL	E	☐ Change ☐ Addition
NAME			6.2 NAM	E	
STREET ADDRESS			6.3 STR	EET ADDRESS	s

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.

6.4 CfTY-ST-ZIP

SIGNATURE: