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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POLK C	IMENT # F41316 COUNTY POOLS & ROCK, II	NC.		447.4		
Principal Place of Business Mailing Address 1308 MEADOW CIR NE 1308 MEADOW CIR NE C/O JESSE M HADSOCK. JR C/O JESSE M HADSO WINTER HAVEN FL 33881-2769 WINTER HAVEN FL 33					Date Incorporated or Qualified	
2 Principal	Place of Business	2a. Mailing Address			08/14/1981	
		26	¬ງ ້		59-2213078 Not Applicable	
Suite Apt	. # etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required	
City & Sta	tte	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Ζф	Country	Zip	Coun	itry	8. This corporation has liability for intangible tax under s. 199.032,	
24	25	29	30	···	Florida Statutes Yes No 10, Name and Address of New Registered Agent	
9, Name and Address of Current Registered Agent				81 Name		
HADSOCK, JESSE M, JR 1308 MEADOW CIRCLE WINTER HAVEN FL 33880				82 Street Address (P.O. Box Number is Not Acceptable) 83		
			Ì	B4 City	FL 85 Zip Code	
office or agent. [t to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	02 and 607.1508, Florida State e of Florida Such change was jations of, Section 607.0505, I	utes, the abs s authorized Florida Statu	ove-named by the cor ites.	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Segment hypothor printed name or registered ag			Agerit signaturi	ture required when reinstating) DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPS	DELETE	1.1 TITU		Change Addition	
NAME	HADSOCK, JESSE M JR		1.2 NAM			
STREET ADDRESS	1308 MEADOW CR WINTER HAVEN, FL 00000		4	EET ADDRESS	8	
CITY-ST-ZIP TITLE	THITEN TIMEN, I'L WOOD	T DELETE	1 4 CiT	r-St-ZIP	Change Addition	
NAME		F" DETECT	2.2 NA		La thange La rothio	
STREET ADDRESS			1	eet address	8	
CRY-S1-ZiP				Y-ST-ZIP	`	
Title		DELETE	3.1 TITU		Change Addition	

64 CITY-ST-ZIP

14. I do 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 Black 12 or Black 13 if changed, or on an attachment with an address.

3.2 NAME

4,1 TITLE

4.2 NAME

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY - ST - ZIP

3.4 CITY-ST-ZIP

SIGNATURE

NAME STREET ADDRESS

THE

NAMi

THLE

THTLE

CITY - S1 - 7IP

STREET ADDRESS

STREET ADDRESS

STREET AUDRESS

City - St - 7IP

CITY-S1-7F

SNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR

HOLDESSE M. HadsaK.

1 4/2/97 294 5771 ste Daytime Phone #

Change

Change

Change

Addition

Addition

Addition

FILED

Apr 11 1997 8:00am

Secretary of State