

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # F89305

1. Entity Name
RAY LENNON POOL SERVICE, INC.



Principal Place of Business
2799 NW 2 AVE
#215
BOCA RATON, FL 33431

Mailing Address
1012 SW 3 ST.
BOCA RATON, FL 33486 US

FILED
Feb 23, 2007 08:00 AM
Secretary of State



01052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2199870

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LENNON, CAROLE
1012 SW 3RD STREET
BOCA RATON, FL 33486

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IN THIS SPACE**

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 accept 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

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDS
LENNON, CAROLE
1012 SW 3RD ST.
BOCA RATON, FL 33486

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
LENNON, MICHAEL
10253 RIVERBEND TERRACE
BOCA RATON, FL 33498

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
LENNON, JOSEPH
3543 NE BOCA RATON ROAD
BOCA RATON, FL 33431

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000646045
03/06/07-80014-012 158.75

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IN THIS SPACE**

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 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE

Carole Lennon Carole Lennon

2/20/07 561-391-3982