

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

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PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **F91838 (5)**  
1. Corporation Name  
~~ABER POOLS, INC.~~ **Aber-Paragon Pools, Inc.**



Principal Place of Business  
**C/O DOUGLAS LOUIS ABER  
3501 BEACON DR.  
PT CHARLOTTE FL 33980**

Mailing Address  
**23375 JANICE AVE  
3501 BEACON DR.  
PT CHARLOTTE FL 33980  
US**

2. Principal Place of Business  
21  
Suite, Apt. #, etc.  
22  
City & State  
23  
Country  
24

2a. Mailing Address  
26  
Suite, Apt. #, etc.  
27  
City & State  
28  
Zip  
29  
Country  
30

3. Date Incorporated or Qualified  
**07/23/1982**

3a. Date of Last Report  
**03/28/1995**

4. FEI Number  
**59-2210653**

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 has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**ABER, DOUGLAS LOUIS  
3501 BEACON DR.  
PT. CHARLOTTE FL 33980**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code  
**FL**

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 607.0506, Florida Statutes.

SIGNATURE: *Douglas L. Aber* **Douglas L. Aber, Pres.** **4/27/96**

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>ABER, DOUGLAS LOUIS</b>	
STREET ADDRESS	<b>3501 BEACON DRIVE</b>	
CITY-ST-ZIP	<b>PT. CHARLOTTE FL</b>	
TITLE	<b>VST</b>	<input type="checkbox"/> DELETE
NAME	<b>ABER, ROBERT EARL</b>	
STREET ADDRESS	<b>25295 CAYCE CT</b>	
CITY-ST-ZIP	<b>CHARLOTTE HARBOR FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	<b>Sec</b>
23 STREET ADDRESS	<b>Aber, Robert Earl</b>
24 CITY-ST-ZIP	<b>25295 Cayce Ct.</b>
31 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	<b>VP</b>
33 STREET ADDRESS	<b>Schilstra, Glenn</b>
34 CITY-ST-ZIP	<b>3422 Melissa Ct.</b>
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	<b>800001808848</b>
53 STREET ADDRESS	<b>-05/06/96--01031--017</b>
54 CITY-ST-ZIP	<b>***200.00</b>
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Douglas L. Aber* **Douglas L. Aber, Pres.** **4/27/96** **941-627-2001**

CR2E034 (12/95)

*Handwritten initials*



49.2.82

FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

March 8, 1996

Thomas W. Garrard, P.A.  
520 E. Olympia Ave.  
Punta Gorda, FL 33950

Re: Document Number F91838

The Articles of Amendment to the Articles of Incorporation of ABER POOLS, INC. which changed its name to ABER PARAGON POOLS, INC., a Florida corporation, were filed on March 4, 1996.

Should you have any questions regarding this matter, please telephone (904) 487-6050, the Amendment Filing Section.

Steven Harris  
Corporate Specialist  
Division of Corporations

Letter Number: 896A00010472