## F97000003590

(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:						
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)					
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ACCOUNT NO. : 072100000032

REFERENCE : 240031 7272658

AUTHORIZATION

COST LIMIT : \$ 35.00

ORDER DATE: October 16, 2003

ORDER TIME : 4:38 PM

ORDER NO. : 240031-015

CUSTOMER NO:

7272658

CUSTOMER: Mr. Martin J. Degnan

Anthony & Sylvan Pools Corp.

Suite 300, 6690 Beta Dr

Mt. Vernon Square

Mayfield Villag, OH 44143

CHANGE OF AGENT

NAME:

ANTHONY AND SYLVAN POOLS

CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Norma Parramore

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to th	he provisions of sections 607.0502, o	517.0502, 607.1508, or 617.1508, Florid	da Statutes,		
this statement	of change is submitted for a corporat	ion organized under the laws of the State	e of		
Ohio	in order to change its registe	ered office or registered agent, or both,	in the State		
of Florida.	•				
1. The name o	of the corporation: ANTHONY AND SYLV	AN POOLS CORPORATION			
2. The principa	al office address: 6690 Beta Drive,	Suite 300, Mayfield Village, OH 441	L <b>43</b>		
		, i c	<u>,,                                   </u>		
			3 3		
3. The mailing	g address (if different):	<del></del>	70% 6		
			<u>پُرُ</u>		
4. Date of inco	orporation/qualification: _July 10, 1	Document number: F970000	03590		
5. The name a	nd street address of the current registe	ered agent and registered office on file wi	th the		
	partment of State:	. <del>.</del>	A.		
	CT Corporation System				
	1200 South Pine Island Road				
	Plantation, FL 33324				
_					
<ol><li>The name : changed):</li></ol>	and street address of the new registe	ered agent (if changed) and /or registere	ed office (if		
	Corporation Service Company				
	1201 Hays Street				
	(P.O. Box or personal mailbox NOT acceptable)				
	Tallahassee, FL 32301				
The street add agent, as chan	lress of its registered office and the staged will be identical.	reet address of the business office of its	registered		
Such change vauthorized by	was authorized by resolution duly add the board, of the corporation has bee	opted by its board of directors or by an connection in writing of the change.	officer so		
	cer, chairman or vice opairman of the board)	Laura R. Dunlap, Attorney in Fact (Printed or Typed name and title)	<del></del>		
i juriner agrec performance c registered age	ent. Or, it this document is being file	statutes relative to the proper and com and accept the obligation of my position of merely to reflect a change in the regis on has been notified in writing of this ch	tered		
<u> </u>	(Signature of Registered Agent)	10-15-03 (Date)	<del> </del>		
If signing on beh	nalf of an entity:	Carle Lohi			
	•	Asst. Vice President			
	(Typed or Printed Name)	(Capacity)			

\* \* \* FILING FEE: \$35.00 \* \* \*