

# F99000001215

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**To:**

Division of Corporations  
Fax Number : (850) 617-6380

**From:**

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

FILED STATE  
SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
10 JUL 30 PM 1:39

**REGISTERED AGENT CHANGE  
PENTAIR WATER POOL AND SPA, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

RECEIVED  
2010 JUL 30 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA/RO/chs  
@ 7/30/10

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: PENTAIR WATER POOL AND SPA, INC.  
Name of Corporation

DOCUMENT NUMBER: F99000001215

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karla Stockman

Name of Contact Person

Pentair Inc.

Firm/Company

5500 Wayzata Blvd., Suite 800

Address

Golden Valley, MN 55416-1259

City/State and Zip Code

karla.stockman@pentair.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karla Stockman

Name of Contact Person

763

545-1730

at ( ) Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this  
statement of change is submitted for a corporation organized under the laws of the State of Delaware  
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PENTAIR WATER POOL AND SPA, INC.  
2. The principal office address: 1620 HAWKINS AVENUE, SANFORD, NC 27330  
3. The mailing address (if different): 5500 WAYZATA BLVD., SUITE 800, GOLDEN VALLEY, MN 55416

4. Date of incorporation/qualification: 03/04/1999 Document number: F99000001215

5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State: (If resigned, enter resigned)

NRAI SERVICES, INC.

2731 EXECUTIVE PARK DRIVE SUITE 4

WESTON, FL 33331 US

6. The name and street address of the new registered agent (if changed) and /or registered office  
(if changed):

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent,  
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so  
authorized by the board, or the corporation has been notified in writing of the change.

Sharilyn Aldao  
Signature of an officer or director

Sharilyn Aldao, Vice President

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity.  
I further agree to comply with the provisions of all statutes relative to the proper and complete performance  
of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this  
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the  
corporation has been notified in writing of this change.

By: Rebecca Barth  
Signature of Registered Agent

7/29/2010

Date

Assistant Secretary  
Rebecca Barth

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

FILED STATE  
SECRETARY OF FLORIDA  
TALLAHASSEE  
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