2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005034

FILED Jul 22, 2004 Secretary of State

Entity Nan	ne: POLARIS	POOL SYSTEMS, INC.				
Current Principal Place of Business:			New Principal Place of Business:			
2620 COMMERCE WAY VISTA, CA 920838423			2620 COMMERCE WAY VISTA, CA 92081			
Current Mailing Address:			New Mailing Address:			
2620 COMMERCE WAY VISTA, CA 920838423				2620 COMMERCE WAY VISTA, CA 92081		
FEI Number:	13-3786641	FEI Number Applied For() FEI No	umber Not Appl	icable () Certificate of Status Desired (X)		
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:		
1200 SOUT	ORATION SYS TH PINE ISLAN ON, FL 33324	ND ROAD				
The above in the State	named entity s of Florida.	submits this statement for the purpose	of changing it	ts registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electron	ic Signature of Registered Agent		Date		
Election Can	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PSD () HOWARD, GRE 252 FIFTH STR ENCINITAS, CA	EET	Title: Name: Address: City-St-Zip:	PSD (X) Change () Addition KOWNACKI, ERIC J 18674 LOCKSLEY STREET SAN DIEGO, CA 92128		
Title: Name: Address: City-St-Zip:	DANIELS, TERF QUAD-C 230 EA	Delete RY AST HIGH STREET IILLE, VA 22902	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VD () KOWNACKI, EF 18674 LOCKSL SAN DIEGO, CA	EY STREET	Title: Name: Address: City-St-Zip:	D (X) Change () Addition BINNING, GARY 38 BUXTON ROAD CHATHAM, NJ 07928		
Title: Name: Address: City-St-Zip:	D () BINNING, GARY 38 BUXTON RC CHATHAM, NJ	PAD	Title: Name: Address: City-St-Zip:	D (X) Change () Addition HASWELL, ROBERT 41 BUTLER STREET COS COB, CT 06807		
Title: Name: Address: City-St-Zip:	D () HASWELL, ROI 41 BUTLER STI COS COB, CT	REET	Title: Name: Address: City-St-Zip:	D (X) Change () Addition ROSS, ELLIOT 8 HUNTING HOLLOW DRIVE PEPPERPIKE, OH 44124		
Title: Name: Address: City-St-Zip:	D (X) ROSS, ELLIOT 8 HUNTING HOI PEPPERPIKE, 0		Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERIC J KOWNACKI **PSD** 07/22/2004