

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99076

FILED  
Jan 11, 2006  
Secretary of State

Entity Name: ATLAS SWIMMING POOLS, INC.

**Current Principal Place of Business:**

1825 7TH AVENUE NORTH  
LAKE WORTH, FL 33461

**New Principal Place of Business:**

**Current Mailing Address:**

1825 7TH AVENUE NORTH  
LAKE WORTH, FL 33461

**New Mailing Address:**

FEI Number: 59-2226115

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

KOVNER, SIDNEY  
139 ISLE VERDE WAY  
PALM BEACH GARDENS, FL 33418 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SIDNEY KOVNER,  
Address: 139 ISLE VERDE WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP ( ) Delete  
Name: ALVIN HORING,  
Address: 505 SOUTHERN BLVD.  
City-St-Zip: EAST MARION, NY 11939

Title: SEC ( ) Delete  
Name: ELEANOR KOVNER,  
Address: 139 ISLE VERDE WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33418

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: SIDNEY KOVNER

P

01/11/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date