2008 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE

Mar 31, 2008 08:00 Al **DOCUMENT # G44046 Secretary of State** BONAFIDE POOL BUILDERS, INC. Principal Place of Business Mailing Address 2210 FLORIDA BLVD 2210 FLORIDA BLVD. NEPTUNE BEACH, FL 32266 NEPTUNE BEACH, FL 32266 US No Chg-P CR2E034 (11/05) 02292008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2381749 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE JACKSON, ANGELIA J 12162 CEDAR TRACE DR SOUTH JACKSONVILLE, FL 32246 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. U00000875194 04/11/08-80023-008 150.00 TITLE NAME LEVESQUE, ROBERT 69 OAKWOOD ROAD STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32250 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if

FILED

Davima Phose #