2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G74279

FILED Apr 29, 2009 Secretary of State

Entity Name: REED'S SWIMMING POOLS AND SERVICE, INC.

Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
C/O DAVIE	CHARLES R	EED			
712 W. LU	MSDEN RD.				
BRANDON	N, FL 33511	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
C/O DAVID CHARLES REED 712 W. LUMSDEN ROAD			C/O DAVID CHARLES	C/O DAVID CHARLES REED 712 W. LUMSDEN RD.	
BRANDON	N, FL 33511	US	BRANDON, FL 33511	US	
FEI Number:	: 59-2348780	FEI Number Applied For ()	El Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address of	f New Registered Agent:	
	\/D D D				
	MSDEN RD. N, FL 33511	US			
2, ., 1201	., . 2 00011				
		submits this statement for the purpo	ose of changing its registered	d office or registered agent, or both,	
n the State	e of Florida.				
SIGNATUR	RE:				
	Electror	nic Signature of Registered Agent		Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title:	Р () Delete	Title:	() Change () Addition	
Name:	REED, DAVID		Name:	(/ - · · · · · · · · · · · · · · · · · ·	
\ddress:	120 WOODALE	DRIVE	Address:		
City-St-Zip:	BRANDON, FL		City-St-Zip:		
Γitle:	ST () Delete	Title:	() Change () Addition	
Name:	REED, DAVID		Name:	() Shange () / Maillion	
\ddress:	110 WOODALE		Address:		
City-St-Zip:	BRANDON, FL		City-St-Zip:		
Γitle:	VP () Delete	Title:	() Change () Addition	
Name:	WILLIAMS, CY		Name:	() Shange () / waltern	
\ddress:	114 WILDOAK		Address:		
City-St-Zip:	BRANDON, FL		City-St-Zip:		
Γitle:	VP () Delete	Title:	() Change () Addition	
Name:	HUNT, ALAN	•	Name:		
\ddress:	6805 CORONE	T RD	Address:		
City-St-Zip:	LAKELAND, FL	. 33811	City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify 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:	DAVID D. REED	PD	04/29/2009