

AMMENDED
2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H00640

1. Entity Name

BLUE IMAGE POOLS, INC.

Principal Place of Business Mailing Address

% Perry L. Friedt 1556 Larhaz Ct. Orange Park FL 32073	% Perry L. Friedt 1556 Larhaz Ct. Orange Park FL 32073
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2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country	4. FEI Number 5 9 - 2 3 9 6 5 1 1	Applied For Not Applicable
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				5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Thomas L. Friedt
1556 Larhaz Ct.
Orange Park, FL 32073

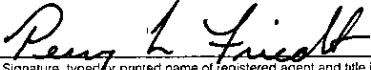
Name
Perry L. Friedt

Street Address (P.O. Box Number is Not Acceptable)

1556 Larhaz Court

City Orange Park	FL	Zip Code 32073
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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.

SIGNATURE 
Signature, type or printed name of registered agent and title if applicable.

Perry L. Friedt

7/16/01

DATE

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS: \$150.00

**After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Thomas L. Friedt 1556 Larhaz Ct. Orange Park, Fl 32073	<input checked="" type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	600004525188-09 -08/08/01--01096--013 *****61.25 *****61.25	<input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Friedt, Perry L. 1852 Lakotna Dr. Orange Park, FL 32073	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST Friedt, Nancy A. 1556 Larhaz Court Orange Park, FL 32073	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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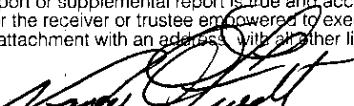
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 
Name of Person Signing Officer or Director

Nancy A. Friedt

7/16/01

(904) 264-0872

Date

Daytime Phone #

CR2E034 (11/00)

FILED
01 JUL 25 PM 2:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA