FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

... AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # H22593 (8)

1. Corporation Name

POOLS BY RIPLEY, INC.

Principal Place of Business	Mailing Address
1703 NE 8TH AVE OCALA FL 32670	1703 NE 8TH AVE OCALA FL 32670

3. Date Incorporated or Qualified: 09/25/1984
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2461535 — Applied For / Not Applicable

2. Principal Place of Business: 21
2a. Mailing Address: 26
Suite, Apt. # etc.: 22 / 27
City & State: 23 / 28
Zip: 24 34470 — Country: 25
Zip: 29 34470 — Country: 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

RIPLEY, GORDON C. JR.
1703 NE 8TH AVE
OCALA FL 32670

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code 34470

11. Pursuant to the provisions of sections 607.0505 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	~~DP~~
NAME	~~RIPLEY, GORDON C., SR.~~
STREET ADDRESS	~~RT.#2A, BOX 153-E.~~
CITY-ST-ZIP	~~MORRISTON FL~~
TITLE	~~DST~~
NAME	RIPLEY, GORDON C., JR.
STREET ADDRESS	4090 SE 25TH TERRACE
CITY-ST-ZIP	OCALA FL
TITLE	~~DV~~
NAME	~~RIPLEY, RAYMOND SCOTT~~
STREET ADDRESS	~~RT. 2A BOX 153-E~~
CITY-ST-ZIP	~~MORRISTON FL~~

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	PRESIDENT, DIRECTOR	☑ Change ☐ Addition
2.2 NAME	RIPLEY, GORDON C., JR	
2.3 STREET ADDRESS	4090 SE 25TH TERRACE	
2.4 CITY-ST-ZIP	OCALA, FL 34480	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	SECRETARY, TREASURER, DIR	☐ Change ☑ Addition
4.2 NAME	RIPLEY, CONNIE J.	
4.3 STREET ADDRESS	4090 SE 25TH TERRACE	
4.4 CITY-ST-ZIP	OCALA, FL 34480	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i) Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Connie Ripley — 4/21/95 — (904) 732-7552
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CONNIE J. RIPLEY

0353066 CP