## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CITY-ST-ZIP

**FILED PROFIT** Mar 05 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (9) H52117 BINGHAM'S POOL SERVICE, INC. Principal Place of Business Mailing Address 13600 N BRANCH RD. 13600 N BRANCH RD. SARASOTA FL 34240 SARASOTA FL 34240 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/11/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2527162 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zib Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 Yes □ No 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BINGHAM, ROBERT C. 13600 N. BRANCH RD. Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34240 83 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 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 Jorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am farming with and accept the obligations of, Section, 607.0505, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ■ DELETE \_\_ Change Addition 1.1 TITLE NAME BINGHAM, ROBERT C. 1.2 NAME STREET ADDRESS 13600 N. BRANCH RD. 1.3 STREET ADDRESS **SARASOTA FL 34240** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE VST 2.1 TITLE ☐ Change Addition BINGHAM, PAMELA E. NAME 2.2 NAME 13600 N. BRANCH RD. STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL 34240 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP TITLE DELETE 4.1 TITLE ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETË TITLE Change 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

6.4 CITY - ST - ZIP 14. 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 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.