

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **H64770** (1)

1. Corporation Name

**SWIMMING POOL OWNERS AND SUPPLY, INC.**



Principal Place of Business

**6221 PEMBROKE ROAD  
HOLLYWOOD FL 33023**

Mailing Address

**6221 PEMBROKE ROAD  
HOLLYWOOD FL 33023**

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

**07/02/1985**

3a. Date of Last Report

**05/01/1995**

4. FEI Number

**58-2551364**

Applied For  
Not Applicable

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. 190.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**BELLET, DANNY  
6221 PEMBROKE ROAD  
HOLLYWOOD FL**

10. Name and Address of New Registered Agent

81 Name

**Same**

82

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

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1001, 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 this appointment as registered agent. I am familiar with and accept the obligations of Section 607.0503, Florida Statutes.

SIGNATURE

**X**

Print Name, Address, and City, State, and Zip

Date

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

**PD  
BELLET, DANNY  
6221 PEMBROKE RD  
HOLLYWOOD FL**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP

☐ Change ☐ Addition

5. TITLE  
6. NAME  
7. STREET ADDRESS  
8. CITY-STATE-ZIP

☐ Change ☐ Addition

9. TITLE  
10. NAME  
11. STREET ADDRESS  
12. CITY-STATE-ZIP

☐ Change ☐ Addition

13. TITLE  
14. NAME  
15. STREET ADDRESS  
16. CITY-STATE-ZIP

☐ Change ☐ Addition

17. TITLE  
18. NAME  
19. STREET ADDRESS  
20. CITY-STATE-ZIP

☐ Change ☐ Addition

21. TITLE  
22. NAME  
23. STREET ADDRESS  
24. CITY-STATE-ZIP

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Daniel Bellet maria 19 966-6226**

CR2E034 (12/95)