

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H65148

1. Entity Name

MID FLORIDA POOL SERVICES, INC.

FILED
May 01, 2001 8:00 am
Secretary of State

05-01-2001 90105 029 ***150.00

Principal Place of Business

3296 CYPRESS GARDENS RD.
WINTER HAVEN FL 33884

Mailing Address

3296 CYPRESS GARDENS RD.
WINTER HAVEN FL 33884

2. Principal Place of Business

6840 Cypress Gardens Blvd

3. Mailing Address

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Winter Haven, Fl.

Zip

Country

33884

USA

City & State

Winter Haven, Fl.

Zip

Country

33884

USA

4. FEI Number 59-2559315

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOSSE, ANDREW L.
3296 CYPRESS GARDENS ROAD
WINTER HAVEN FL 33884

7. Name and Address of New Registered Agent

Name

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

6840 Cypress Gardens Blvd

City

Winter Haven

Zip Code

33884

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 Andrew L. Bosse Andrew L. Bosse President 4-23-01

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE PD
NAME BOSSE, ANDREW L.
STREET ADDRESS 141 SANDBURG LANE
CITY-STATE-ZIP WINTER HAVEN FL ☐ Delete

TITLE VPD
NAME BOSSE, JOAN L.
STREET ADDRESS 141 SANDBURG LANE
CITY-STATE-ZIP WINTER HAVEN FL ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME Bosse, Andrew L.
STREET ADDRESS 974 S. Lake Starr Blvd
CITY-STATE-ZIP Lake Wales, Fl. 33853

TITLE VPD ☒ Change ☐ Addition
NAME Bosse, Joan L.
STREET ADDRESS 974 S. Lake Starr Blvd
CITY-STATE-ZIP Lake Wales, Fl. 33853

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

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: Andrew L. Bosse Andrew L. Bosse President 4-23-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)