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

Mar 18 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # H80493 (0) ADVANCE POOL, INC. Principal Place of Business Mailing Address 1721 SIMONTON AVE. 1721 SIMONTON AVE. ORLANDO FL 32806 ORLANDO FL 32806 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/11/1985 2. Principal Place of Business 2a. Maring Address Applied For 21 59-2582567 Not Applicable Suite. Apt # etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country Žπ This corporation owes or has paid the current year Intangible Yes 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MCGUIRE, PATRICK W. 1721 SIMONTON AVE. 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32806 В3 84 City 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 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 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition MCGUIRE, PATRICK W. NAME 1.2 NAME 1721 SIMONTON AVE. STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change 21 100 € TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DEFETE Addition 3 1 TITLE Change 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS CITY-\$1-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP Addition DELETE Change TITLE 6 1 TITLE

## **FILED**

6.4 CITY - ST - ZIP CITY-ST-ZIP 14. Thereby 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 suppliemental 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 of 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, goth at attrictment with an address.

6 2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS