


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 19, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # H85392</b> 1. Entity Name <b>FUTRELL CUSTOM POOLS INC.</b>	
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Principal Place of Business <b>512 N. PINE MEADOW DR. DEBARY, FL 32713</b>	Mailing Address <b>512 NO PINE MEADOW DR. DEBARY, FL 32713</b>
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02172005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2605707</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>FUTRELL, DINA R. 512 N. PINE MEADOW DR. DEBARY, FL 32713</b>
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**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD FUTRELL, DINA L 512 N. PINE MEADOW DR. DEBARY, FL 32713
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V FUTRELL, TERRY 512 N. PINE MEADOW DR. DEBARY, FL 32713
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V FUTRELL, JEFF 196 STEEPLE CHASE CIR. SANFORD, FL 32771
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S FUTRELL, TISHA 196 STEEPLE CHASE CIR. SANFORD, FL 32771
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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02/19/05-80027-001 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Dina L. Futrell* 2/17/05 407-323-4223  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #