## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# J16432

Entity Name: BARROW POOLS, INC.

662 ANCHORAGE DR.

NORTH PALM BEACH, FL 33408

Address:

City-St-Zip:

FILED Jan 24, 2006 Secretary of State

Entity Nai	me: BARROV	V POOLS, INC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	HAWK WAY ALM BEACH, I	FL 33408				
Current Mailing Address:			New Maili	New Mailing Address:		
	HAWK WAY ALM BEACH, I	FL 33408				
FEI Number:	: 59-2719237	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
BIG OAK F 1803 AUS WEST PA	JOHN P.A. PROFESSION, TRALIAN AVE LM BEACH, FI	S STE E _ 33409 US				
	named entity: e of Florida.	submits this statement for the	e purpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	RE:					
	Electror	nic Signature of Registered A	agent	Date		
Election Car	npaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	BARROW, JOS 960 LAUREL R		Title: Name: Address: City-St-Zip:	(	( ) Change() Addition	
Title: Name: Address: City-St-Zip:	BARROW, IRE 960 LAUREL R		Title: Name: Address: City-St-Zip:	BARROW, IR 960 LAUREL		
Title: Name: Address: City-St-Zip:	GARRIS, JOSE 720 KITTYHAW		Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title: Name:	VP ( ) JAMES GARRI	) Delete S. SEAN	Title: Name:	(	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: JOSEPH N. GARRIS PRES 01/24/2006