2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J25729

Entity Name: TAMPA BAY POOL SERVICE, INC.

FILED May 04, 2007 Secretary of State

Current Dringing I Blood of Business			Now Bring	New Principal Place of Business:	
Current Principal Place of Business:			New Fillio	ipai riace of business.	
5008 W LINEBAUGH AVE #40					
TAMPA, FL 33625 US					
Current Mailing Address:			New Maili	New Mailing Address:	
P.O. BOX 152472 TAMPA, FL 33684					
FEI Number: 59-2708571 FEI Number Applied For () FEI Num			FEI Number Not Appl	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
TEAR, WILLIAM G 8530 N NEWPORT AVE TAMPA, FL 33604 US					
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:					
	Electroni	c Signature of Registered Agent		Date	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () TEAR, WILLIAM 8530 N NEWPO TAMPA, FL 336	RT AVE	Title: Name: Address: City-St-Zip:	P (X) Change () Addition TEAR, WILLIAM G 8530 N NEWPORT AVE TAMPA, FL 33604 US	
Title: Name: Address: City-St-Zip:	S () TIPTON, DERRIG 3406 SUNRISE TAMPA, FL 336	VILLAS CT. N.	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition MARAMAN, DANIEL L 6403 S. ROBERTS AVE TAMPA, FL 33616 US	
Title: Name: Address: City-St-Zip:	VP () CARDONA, JOH 6801 CHIPPENE TAMPA, FL 336	ALE CT	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition RIVEROS, LUIS A 3402 LATANIA DR. # 322 TAMPA, FL 33618 US	
Title: Name: Address: City-St-Zip:	VP () BICKLEY, DERE 6508 LOS ALTO TAMPA, FL 336	S WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () MERKAL, STEVI 3425 DEERFIEL CLEARWATER,	D LN.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () CROY, GUY D 10406 N. ARDEN AVE.,	Delete FL 33612	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: WILLIAM G. TEAR P 05/04/2007