

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J25729

FILED
Mar 28, 2009
Secretary of State

Entity Name: TAMPA BAY POOL SERVICE, INC.

Current Principal Place of Business:

5008 W LINEBAUGH AVE
#40
TAMPA, FL 33625 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 152472
TAMPA, FL 33684

New Mailing Address:

FEI Number: 59-2708571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEAR, WILLIAM G
8530 N NEWPORT AVE
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TEAR, WILLIAM G
Address: 8530 N NEWPORT AVE
City-St-Zip: TAMPA, FL 33604 US

Title: VP () Delete
Name: MARAMAN, DANIEL L
Address: 6403 S. ROBERTS AVE
City-St-Zip: TAMPA, FL 33616 US

Title: VP () Delete
Name: RIVEROS, LUIS A
Address: 3402 LATANIA DR. # 322
City-St-Zip: TAMPA, FL 33618 US

Title: VP () Delete
Name: BICKLEY, DEREK J
Address: 6508 LOS ALTOS WAY
City-St-Zip: TAMPA, FL 33614

Title: T () Delete
Name: MERKAL, STEVEN B
Address: 3425 DEERFIELD LN.
City-St-Zip: CLEARWATER, FL 33761

Title: S (X) Delete
Name: BUCKHOLZ, JONATHAN W
Address: 3803 PRESERVE CT.
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: HERON, CHRISTINE E
Address: 106 S. DELAWARE
City-St-Zip: TAMPA, FL 33606

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: HOF, KENNETH E
Address: 11417 WAVELAND WAY
City-St-Zip: TAMPA, FL 33624

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

03/28/2009

Electronic Signature of Signing Officer or Director

Date