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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

(2)

BLUE HERON POOL SERVICES, INC.

% HUGH PR	f Business	Mailing Address		ł			
POST OFFICE	E 2203	% HUGH PROCTOR POST OFFICE 2203 PALM BEACH FL 3348	n				
THEM DENO	1112 30400	Them benoff to obtain	•	3. Date Incorporated or Qualified	3a. Date of	/03/19	95
2. Principal Plac	e of Business rt LEAR	2a. Mailing Address 26 % Robert I	ear	4. FEI Number 59-2778511			oplied For ot Applicable
Suite, Apt. #,	etc. Box 2203	Suite, Apt. #, etc.  27 P.O. BOE 2	2203	5. Certificate of Status Desired	SZ .	\$8.75 Fee Re	Additional equired
City & State	Beach, FL	City & State 28 Palm Beach	). FT.	Election Campaign Financing     Trust Fund Contribution		\$5.00 Added	May Be to Fees
33480	Country	Zip.	Country 30 Palm Bea	8. This corporation has liability for its Florida Statutes	intangible tax u	inder s 1	99.032,
	9. Name and Address of Current		<u> </u>	10. Name and Address of New R	egistered Ag	ent	
			81 Name <sub>T</sub>	Lear, Robert			
PROCT	or, hugh				nie)		
2980 BI	URGOYNE LANE		Street A	tdress (P.O. Box Number is Not Acceptab L 0250 Serenade Land	e e		
WEST F	PALM BEACH FL 33409		63				
			<b>84</b> City 1	Vest Paln Beach,	Eì	85 Zig	Gode L111
<u> </u>	0.700	1.007 dE00 Charles Charles		poration submits this statement for the pur	reces of abone	ion ite re	oietared offic
or registeres	diagont, or both, in the State of Florid	<ul> <li>Such change was authorized</li> </ul>	d by the corporation's b	oard of directors. I hereby accept the appoint	ointment as re	gistered a	agent. I am
<ul> <li>familiar with</li> </ul>	, and accept the obligations of, Section	on 607.0505, Florida Statutes.	Must Lan		6/96		
CHANTOLIC	Robert Lear	/4	Registureo Agent signature req		DATE		
· · · · · · · · · · · · · · · · · · ·	gnature, type for printed name of registered agont a OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF		IRECTOR	RS IN 12
2. 1. !	- PD	[] DELETE	1 1 TITLE			Change	Addition
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REET ADDRESS			1.3 STREET WITHERS				
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certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under only 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dorothy Proctor, ST Worldby Proctor 02/05/96 (407)471-8581