

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 25, 2003 8:00 am**  
**Secretary of State**

04-25-2003 90321 042 \*\*\*150.00

**DOCUMENT # J71926**

**1. Entity Name**  
**PRECISION POOLS, INC.**



**Principal Place of Business**  
**411 N.E. 3RD AVENUE**  
**CAPE CORAL FL 33909**

**Mailing Address**  
**411 N.E. 3RD AVENUE**  
**CAPE CORAL FL 33909**

**2. Principal Place of Business**

**3. Mailing Address**

**4716 Chiquita Blvd**

**4716 Chiquita Blvd**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**City & State**  
**Cape Coral**

**City & State**  
**Cape Coral FL**

**Zip**  
**FL**

**Country**  
**33914**

**Zip**  
**33914**

**Country**

**4. FEI Number**  
**59-2846088**

**Applied For**

**Not Applicable**

**5. Certificate of Status Desired**

☐

**\$8.75 Additional  
Fee Required**

☒ **CHECK HERE IF MAKING CHANGES**



**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**KOCH, ERIC L**  
**3806 HIDDEN ACRES CIRCLE**  
**NORTH FORT MYERS FL 33903**

**Name**

**Street Address (P.O. Box Number is Not Acceptable)**

**City**

**FL**

**Zip Code**

**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**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**DATE**

**4/23/03**

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing**  
**Trust Fund Contribution.**

☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**  
**PD**  
**FRIGA, MICHAEL H.**  
**3801 SW 19TH PLACE**  
**CAPE CORAL FL**

☐ **Delete**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**  
**1508 SW 58th St**  
**Cape Coral FL 33914**

☒ **Change** ☐ **Addition**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**  
**VSDT**  
**KOCH, ERIC L.**  
**3806 HIDDEN ACRES CR**  
**FT. MYERS FL**

☐ **Delete**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

☐ **Change** ☐ **Addition**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

☐ **Delete**

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☐ **Change** ☐ **Addition**

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**STREET ADDRESS**  
**CITY-ST-ZIP**

☐ **Change** ☐ **Addition**

**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:**

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Date**

**Daytime Phone #**

**4/23/03**

CR2E034 (10/02)