

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J78888

FILED
Apr 06, 2006
Secretary of State

Entity Name: POOL DOCTOR OF THE PALM BEACHES, INC.

Current Principal Place of Business:

3900 B CONSUMER ST.
RIVIERA BEACH, FL 33404 US

New Principal Place of Business:

1040 W. INDUSTRIAL AVE.
#4
BOYNTON BEACH, FL 33426 US

Current Mailing Address:

3900 B CONSUMER ST.
RIVIERA BEACH, FL 33404 US

New Mailing Address:

1040 W INDUSTRIAL AVE.
#4
BOYNTON BEACH, FL 33426 US

FEI Number: 59-2812264

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHN HAMIL
3900 B CONSUMER ST.
RIVIERA BEACH, FL 33404 US

Name and Address of New Registered Agent:

JOHN HAMIL
1040 W INDUSTRIAL AVE
#4
BOYNTON BEACH, FL 33426 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: JOHN HAMIL

04/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAMIL, JOHN PRES
Address: 3900 B CONSUMER ST
City-St-Zip: RIVIERA BEACH, FL 33404

Title: VP () Delete
Name: HAMIL, NADINE VP
Address: 3900 B CONSUMER ST
City-St-Zip: RIVIERA BEACH, FL 33404

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HAMIL, JOHN PRES
Address: 1040 W INDUSTRIAL AVE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: VP (X) Change () Addition
Name: HAMIL, NADINE VP
Address: 1040 W INDUSTRIAL AVE
City-St-Zip: BOYNTON BEACH, FL 33426

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.

SIGNATURE: JOHN HAMIL

PRES

04/06/2006

Electronic Signature of Signing Officer or Director

Date