

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Mayhew
Secretary of State
Office of the Secretary of State

APPROVED
FILED

95 MAY -1 AM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J82102

(1)

POOLMAKERS OF TAMPA BAY, INC.

Principal Office Address

Mailing Address

7743 JODI LYNN DRIVE
TAMPA FL 33615

7743 JODI LYNN DRIVE
TAMPA FL 33615

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/10/1987

3a. Date of Last Report

04/29/1994

4. FEI Number

59-2825101

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Office Address

21

2a. Mailing Address

26

3. State of Incorporation

22

3a. State of Incorporation

27

4. City & State

23

4a. City & State

28

5. Zip

24

5a. Zip

25

5b. Zip

29

5c. Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ORR, ROSS S.
7743 JODI LYNN DR.
TAMPA FL 33615

81. Name

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

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Director)

(Signature of Registered Agent or Director)

(Signature of Registered Agent or Director)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

14. NAME

PD
ORR, ROSS S.
7743 JODI LYNN DR.
TAMPA FL

15. NAME

16. STREET ADDRESS
17. CITY & STATE
18. ZIP

☐ Change ☐ Addition

19. NAME

SVD
ORR, JUDY D.
7743 JODI LYNN DR.
TAMPA FL

20. NAME

21. STREET ADDRESS
22. CITY & STATE
23. ZIP

☐ Change ☐ Addition

24. NAME

25. NAME

26. STREET ADDRESS
27. CITY & STATE
28. ZIP

☐ Change ☐ Addition

29. NAME

30. NAME

31. STREET ADDRESS
32. CITY & STATE
33. ZIP

☐ Change ☐ Addition

34. NAME

35. NAME

36. STREET ADDRESS
37. CITY & STATE
38. ZIP

☐ Change ☐ Addition

39. NAME

40. NAME

41. STREET ADDRESS
42. CITY & STATE
43. ZIP

☐ Change ☐ Addition

44. NAME

45. NAME

46. STREET ADDRESS
47. CITY & STATE
48. ZIP

☐ Change ☐ Addition

49. NAME

50. NAME

51. STREET ADDRESS
52. CITY & STATE
53. ZIP

☐ Change ☐ Addition

54. NAME

55. NAME

56. STREET ADDRESS
57. CITY & STATE
58. ZIP

☐ Change ☐ Addition

59. NAME

60. NAME

61. STREET ADDRESS
62. CITY & STATE
63. ZIP

☐ Change ☐ Addition

64. NAME

65. NAME

66. STREET ADDRESS
67. CITY & STATE
68. ZIP

☐ Change ☐ Addition

69. NAME

70. NAME

71. STREET ADDRESS
72. CITY & STATE
73. ZIP

☐ Change ☐ Addition

74. NAME

75. NAME

76. STREET ADDRESS
77. CITY & STATE
78. ZIP

☐ Change ☐ Addition

79. NAME

80. NAME

81. STREET ADDRESS
82. CITY & STATE
83. ZIP

☐ Change ☐ Addition

84. NAME

85. NAME

86. STREET ADDRESS
87. CITY & STATE
88. ZIP

☐ Change ☐ Addition

89. NAME

90. NAME

91. STREET ADDRESS
92. CITY & STATE
93. ZIP

☐ Change ☐ Addition

94. NAME

95. NAME

96. STREET ADDRESS
97. CITY & STATE
98. ZIP

☐ Change ☐ Addition

99. NAME

100. NAME

101. STREET ADDRESS
102. CITY & STATE
103. ZIP

☐ Change ☐ Addition

104. NAME

105. NAME

106. STREET ADDRESS
107. CITY & STATE
108. ZIP

☐ Change ☐ Addition

109. NAME

110. NAME

111. STREET ADDRESS
112. CITY & STATE
113. ZIP

☐ Change ☐ Addition

114. NAME

115. NAME

116. STREET ADDRESS
117. CITY & STATE
118. ZIP

☐ Change ☐ Addition

119. NAME

120. NAME

121. STREET ADDRESS
122. CITY & STATE
123. ZIP

☐ Change ☐ Addition

124. NAME

125. NAME

126. STREET ADDRESS
127. CITY & STATE
128. ZIP

☐ Change ☐ Addition

129. NAME

130. NAME

131. STREET ADDRESS
132. CITY & STATE
133. ZIP

☐ Change ☐ Addition

134. NAME

135. NAME

136. STREET ADDRESS
137. CITY & STATE
138. ZIP

☐ Change ☐ Addition

139. NAME

140. NAME

141. STREET ADDRESS
142. CITY & STATE
143. ZIP

☐ Change ☐ Addition

144. NAME

145. NAME

146. STREET ADDRESS
147. CITY & STATE
148. ZIP

☐ Change ☐ Addition

149. NAME

150. NAME

151. STREET ADDRESS
152. CITY & STATE
153. ZIP

☐ Change ☐ Addition

SIGNATURE: Judy D. Orr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/95 8/3 1241 2542