

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 08, 2008 08:00 AM
Secretary of State

DOCUMENT # J89853

1. Entity Name
**GOLD MEDAL POOL SERVICE OF PINELLAS COUNTY,
INC.**



Principal Place of Business

**2113 SEAGULL DR
CLEARWATER, FL 33764 US**

Mailing Address

**2113 SEAGULL DR
CLEARWATER, FL 33764 US**



05022008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2845612

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HENSLEY, DIANA
2113 SEAGULL DR
CLEARWATER, FL 33764**

**DO NOT WRITE
IN THIS SPACE**

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

Diana Hensley

Diana Hensley

5/2/08

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**P
HENSLEY, ROGER
2113 SEAGULL DR
CLEARWATER, FL**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**V
HENSLEY, REGAN
6881 NICOLE LN
LARGO, FL 33771**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**ST
HENSLEY, DIANA
2113 SEAGULL DR
CLEARWATER, FL**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

000000850018
06/03/08-80052-015 550.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Diana L. Hensley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/2/08

Date

727-535-5875

Daytime Phone