

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

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # K31570

(0)

1. Corporation Name

PELICAN POOL CARE, INC.



Principal Place of Business

% KIMBERLY LEACH JOHNSON
4501 TAMiami TRAIL NORTH SUITE 300
NAPLES FL 33940
US

Mailing Address

% KIMBERLY LEACH JOHNSON
4501 TAMiami TRAIL N SUITE 300
NAPLES FL 33940
US

2. Principal Place of Business

2a. Mailing Address

21 5875 WASHINGTON ST.

26 293 West Ave.

22 City & State

27 City & State

23 NAPLES FL

28 NAPLES FL

24 33942

29 33963

25 U.S.A.

30 USA.

9. Name and Address of Current Registered Agent

JOHNSON, KIMBERLY LEACH
4501 TAMiami TRAIL NORTH
SUITE 300
NAPLES FL 33940

3. Date Incorporated or Qualified

08/18/1988

3a. Date of Last Report

03/15/1995

4. FCI Number

65-0067397

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 authority for intangible tax under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name SAME AS ABOVE.

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, 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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0604, Florida Statutes.

SIGNATURE

Douglas J. Bladich

2-12-96

12. OFFICERS AND DIRECTORS

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY, STATE, ZIP

12.5 TITLE

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