

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K49232

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** PROGRESSIVE POOL PRODUCTS & SERVICES, INC.

**Current Principal Place of Business:**

109 DUNBAR AVE  
UNIT D  
OLDSMAR, FL 34677

**New Principal Place of Business:**

**Current Mailing Address:**

109 DUNBAR AVE  
UNIT D  
OLDSMAR, FL 34677

**New Mailing Address:**

**FEI Number:** 59-2923003

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROBERT COHEN  
2918 BUSCH LAKE BLVD  
TAMPA, FL 33614 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HOFFMAN, NANCY  
Address: 109 DUNBAR AVE  
City-St-Zip: OLDSMAR, FL 34677

Title: VTD  
Name: HOFFMAN, CHAD  
Address: 109 DUNBAR AVE  
City-St-Zip: OLDSMAR, FL 34677

Title: S  
Name: HOFFMAN, IRA  
Address: 109 DUNBAR AVE  
City-St-Zip: OLDSMAR, FL 34677

I hereby 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 all other like empowered.

SIGNATURE: NANCY HOFFMAN

PRES

02/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date