


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # K72392
 1. Entity Name
POOLS UNLIMITED, INC.



Principal Place of Business
10003 KENDA RIVERVIEW, FL 33569 US

Mailing Address
P O BOX 2775 BRANDON, FL 33509 US



04262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2940291

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**MCCANDLESS, RANDALL T.
 10,003 KENDA DR.
 RIVERVIEW, FL 33569**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2004 Fee will be \$350.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	MCCANDLESS, RANDALL T.
STREET ADDRESS	10,003 KENDA DR
CITY - ST - ZIP	RIVERVIEW, FL 33569
TITLE	DV
NAME	MEYER, SHARI A
STREET ADDRESS	4225 CULBREATH RD
CITY - ST - ZIP	BROOKSVILLE, FL 34601
TITLE	D
NAME	MCCANDLESS, ETTIE LOUISE
STREET ADDRESS	936 BENNINGTON DRIVE
CITY - ST - ZIP	BRANDON, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 04/29/04-80065-008 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Randall T. McCandless **RANDALL T. MCCANDLESS 813-689-7665**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4/26/04 Daytime Phone # _____