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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K86576 (1)

1. Corporation Name

DOCTOR KEN'S POOL REPAIR, INC.



Principal Place of Business

Mailing Address

7601 JEREMY DAVID LANE ← change  
P.O. BOX 382001  
JACKSONVILLE FL 32238-9001

7601 JEREMY DAVID LANE ← change  
P.O. BOX 382001  
JACKSONVILLE FL 32238-9001

2. Principal Place of Business

2a. Mailing Address

21 1807 MT. VERNON DR

26 1807 MT. VERNON DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BERKSHIRE, KENNETH D.  
7601 JEREMY DAVID LANE  
JACKSONVILLE FL 32244

81 Name Kenneth Berkshire  
82 Street Address (P.O. Box Number is Not Acceptable)  
1807 MT. VERNON DR  
83  
84 City Jacksonville FL 85 Zip Code 32210

11. Pursuant to the provisions of Sections 607.0502 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0502, Florida Statutes.

SIGNATURE

*Kenneth Berkshire* P. Kenneth Berkshire 4/27/96

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

(NOTE: Registered Agent Signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  
NAME BERKSHIRE, SHARI  
STREET ADDRESS 7601 JEREMY DAVID LN  
CITY-ST-ZIP JACKSONVILLE FL

1.1 TITLE Vice President  
1.2 NAME Shari Berkshire  
1.3 STREET ADDRESS 1807 MT. VERNON DR.  
1.4 CITY-ST-ZIP Jacksonville, FL. 32210

TITLE V  
NAME BERKSHIRE, KENNETH D.  
STREET ADDRESS 7601 JEREMY DAVID LANE  
CITY-ST-ZIP JACKSONVILLE FL

2.1 TITLE President  
2.2 NAME Kenneth Berkshire  
2.3 STREET ADDRESS 1807 MT. VERNON DR.  
2.4 CITY-ST-ZIP Jacksonville, FL. 32210

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Kenneth Berkshire* P. Kenneth Berkshire 4/27/96 (904) 771-6723

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)