## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L48141

(0)

ALL CLEAR POOL SUPPLIES, INC.

FILED Apr 28 1997 8:00am Secretary of State

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Principal Place of Business Mailing Address				1 (1884) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
\$467 DELTONA BLVD         13110 COOPER RD           \$205 DELTONA BLVD         6205 DELTONA BLVD           \$PRING HILL FL 34606         SPRING HILL FL 34609-5822				<u> </u>		
US		US	./	3. Date Incorporated or Qualified	3a. Date of Last Report	
Outside all and C	Place of Business	los Mailles Address		02/07/1990	107/09/1996	
	TO COOPER Rd	26. Mailing Address 26. /3//0 Coop	20 Ql	4. FEI Number 59-2991872	Applied For	
Suite, Apt.		Suite, Apt. #, etc.	N NO	39-299-1012	Not Applicable  \$8.75 Additional	
22	·	27]		5. Certificate of Status Desired	Fee Required	
City & State Strate See See See See See See See See See S	ING 17111 1-1	City & State 28 S PK ING H	111 F1	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 3 16	09 25 Heyand	<sup>7</sup> ιρ 29 3/609 3	Country HPV Mendo	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes No	
- 210	9. Name and Address of Current		17 C THE NESO	10. Name and Address of New Reg		
FFH	ILHABER, ERIC C	<u>-</u>	81 Name	•	·	
10110 COOPED DO				(D.O. D		
				ess (P.O. Box Number is Not Acceptable)		
٠			83			
			0.1	· · · · · · · · · · · · · · · · · · ·		
			84 City		FL 85 Zip Code	
office or agent. I a	to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obliga	and 607.1508, Florida Statutes of Florida. Such change was autions of, Section 607.0505, Flori	<ul> <li>the above-named corp thorized by the corporal da Statules.</li> </ul>	poration submits this statement for the p lion's board of directors. I hereby accep	urpose of changing its registered t the appointment as registered	
	Signature, typed or printed name of registered agon		Rogistored Agent signature requi		DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC		
TITLE	D COULTABLE COIC C	☐ DEL€1E	1.1 TITLE		Change Addition	
NAME	FEHLHABER, ERIC C		1.2 NAME			
STREET ADDRESS	13110 COOPER RD SPRING HILL FL		1.3 STREET ADDRESS			
CITY-ST-ZIP	D D	Drutt	1.4 CITY-ST-ZIP		D. Ohaman D. Marian	
TITLE	FEHLHABER, JANET M	☐ DELETE	2.1 TITLE		Change Addition	
NAME	13110 COOPER RD		2.2 NAME			
STREET ADDRESS	SPRING HILL FL		2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	OF FIRST FILE TE	DELETE	2.4 C(TY-ST-ZIP 3.1 TITLE		Change Addition	
NAME					The one ide Thy would not	
	1		3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4 C(1)Y-ST-ZIP 4.1 TITLE		Change Addition	
NAME		F-4 pressit	4. 2 NAME		Change FROMION	
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS			
CITY-ST-ZIP		T DELETE	4.4 CHY+S1-ZIP 5.1 TITLE		Change Addition	
TIPLE			J.: THEE		Unange Robiton	
NAME			S O MANAGE			

14. I do 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 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 attay ment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - \$1 - ZIP

6.1 TITLE

6.2 NAME

CIONATURE.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

CHAINAN DI OUR

☐ DELETE

4/10/0

355 1001/1/2

\_\_\_ Addition