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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # **L59150**

(7)

1. Corporation Name SOUTH WIND POOLS, INC. Principal Place of Business Mailing Address HUGH R. PAPY ESO 1214 LAIRD STREET KEY WEST FL 33040 US Mailing Address KEY WEST FL 33040 US						3. Date Incorporated or Qualified 3a. Date of Last Report				
							03/19/1990		/20/199	
2. Principal Pla	ace of Business		2a. Mailing Address				4. FEI Number		LI	Applied For
Suite, Apt. #	#, etc.		Suite, Apt. #, etc.				65-0187742			Not Applicable
2			27				5. Certificate of Status Desired			Additional Required
City & State	9		City & State				6. Election Campaign Financing			O May Be
3 Zip	Count		28	1 .			Trust Fund Contribution		Adde	d to Fees
4]	25	у	Zip 29	Countr 30	У		8. This corporation has liability for Florida Statutes	r intangible ta is □ No	ix under s	199.032,
	9. Name and Addr	ess of Current I		[30]		1	O. Name and Address of New	_	Agent	
_				81	Nam				-3	
PAPY, HUGH ♥ R.					32 Street Address (P.O. Box Number is Not Acceptable)					
	IRD STREET						,			
KEY WES	ST FL 33040			83	9					
				84	City			FL	85 Zig	Code
		Ctata of Davida	no 607, 1508, Florida Stati	ites, the above	Harried	corporation	r sobrints this statement for the pt	urpose of cha	ingang ita i	
SIGNATURE _	Signature proed or print in name	o' register is agy, and	HUGH R. PA	NOTE: Registered Agr				12/23 DATE	196	
SIGNATURE _	Signature proed or print in name	1/1/	HUGH R. PA	>y	nt signatur	e required wher	nrenslating: ADDITIONS/CHANGES TO OFI	ra/23 FICERS AND	JA6 DIRECTO	RS IN 12
SIGNATURE	Signature y/bed/x printy/name D GARCIA, CALIXTO	o' register a egy and DFFICERS AND D	HUGH R.PA	NOTE: Registered Agr	nt signatur	e required wher	n reinstating)	ra/23 FICERS AND	196	
SIGNATURE ES	Signature y Society printy name D GARCIA, CALIXTO RT.5480X 190	of register a soul and DEFICERS AND D	HUGH R. PA	13. 1.1 TITLE 1.2 NAME 1.3 STREE	nt signatur	e required wher	nrenslating: ADDITIONS/CHANGES TO OFI	PA 23 DATE FICERS AND	JA6 DIRECTO	RS IN 12
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SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/23/96 294-7665