2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2011
Secretary of State

DOCUMENT# M93295

Entity Name: CASCADE POOL SERVICE, INC.

Current Principal Place of Business:

% ROBERT COCHRAN
2759 S.W. 11TH PLACE
DEERFIELD BCH., FL 33442

New Principal Place of Business:

% ROBERT COCHRAN
2759 S.W. 11TH PLACE
DEERFIELD BCH., FL 33442 US

Current Mailing Address:

% ROBERT COCHRAN
2759 S.W. 11TH PLACE
DEERFIELD BCH., FL 33442

New Mailing Address:

% ROBERT COCHRAN
2759 S.W. 11TH PLACE
DEERFIELD BCH., FL 33442 US

FEI Number: 65-0066465 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COCHRAN, ROBERT
2759 S.W. 11TH PLACE
DEERFIELD BCH., FL 33442 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: COCHRAN, ROBERT E.
Address: 2759 S.W. 11TH PLACE
City-St-Zip: DEERFIELD BCH., FL 33442 US

Title: D
Name: COCHRAN, BUFF
Address: 2759 S.W. 11TH PLACE
City-St-Zip: DEERFIELD BCH., FL 33442 US

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: ROBERT E COCHRAN PRES 04/27/2011

Electronic Signature of Signing Officer or Director Date