

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P00000047312

**FILED**  
**Oct 19, 2010**  
**Secretary of State**

**Entity Name:** CLASSIC POOLS OF NAPLES, INC.

**Current Principal Place of Business:**

5811 DOGWOOD WAY  
NAPLES, FL 34116

**New Principal Place of Business:**

**Current Mailing Address:**

5811 DOGWOOD WAY  
NAPLES, FL 34116

**New Mailing Address:**

**FEI Number:** 59-3659451

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ALL FLORIDA FIRM INC  
813 DELTONA BLVD  
STE A  
DELTONA, FL 32725 US

**Name and Address of New Registered Agent:**

MUSTARI, JEFF  
5811 DOGWOOD WAY  
NAPLES, FL 34116 US

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: JEFF MUSTARI

10/19/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: O  
Name: MUSTARI, JEFF  
Address: 5811 DOGWOOD WAY  
City-St-Zip: NAPLES, FL 34116

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: JEFF MUSTARI

OWNE

10/19/2010

Electronic Signature of Signing Officer or Director

Date