

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000069012

FILED
Jan 07, 2009
Secretary of State

Entity Name: POOL ONE PLASTERING DIVISION, INC.

Current Principal Place of Business:

18380 PAULSON DRIVE
SUITE D1-D4
PORT CHARLOTTE, FL 33954

New Principal Place of Business:

Current Mailing Address:

18380 PAULSON DRIVE
SUITE D1-D4
PORT CHARLOTTE, FL 33954

New Mailing Address:

FEI Number: 65-1033383

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREIRA-NASKALE, ANGELA B
4192 SOUTH SAN MATEO DRIVE
NORTH PORT, FL 34288 US

Name and Address of New Registered Agent:

PEREIRA-NASKALE, ANGELA B
18380 PAULSON DRIVE
BLDG D
PORT CHARLOTTE, FL 33954 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: ANGELA B PEREIRA-NASKALE

01/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NASKALE, CHRISTOPHER G
Address: 4192 SOUTH SAN MATEO DRIVE
City-St-Zip: NORTH PORT, FL 34288 US

Title: VP () Delete
Name: PEREIRA-NASKALE, ANGELA B
Address: 4192 SOUTH SAN MATEO DRIVE
City-St-Zip: NORTH PORT, FL 34288 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NASKALE, CHRISTOPHER G
Address: 18380 PAULSON DRIVE, BLDG D
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: VP (X) Change () Addition
Name: PEREIRA-NASKALE, ANGELA B
Address: 18380 PAULSON DRIVE, BLDG D
City-St-Zip: PORT CHARLOTTE, FL 33954 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANGELA B PEREIRA-NASKALE

VP

01/07/2009

Electronic Signature of Signing Officer or Director

Date