2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000092267

Entity Name: STERLING POOLS & SPAS. INC.

FILED May 11, 2007 Secretary of State

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Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	NDREWS CIR ERS, FL 33919				
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
	NDREWS CIR ERS, FL 33919				
FEI Number:	65-1059994	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	NDREWS CIR.	N. US	BAKOS, ROBERT J 6247 ST. ANDREWS C FT. MYERS, FL 33919	** ** * **	
The above in the State		ubmits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE: JOHN R BAKOS				05/11/2007	
	Electronic	Signature of Registered Age	ent	Date	
		(2)(b), F.S., the corporation did no Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS	AND DIRECT	ORS:	ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	PD (X) I BOLLES, PATRIO 6247 ST. ANDRE		Title: (Name: Address:) Change () Addition	

City-St-Zip: FT. MYERS, FL 33919 City-St-Zip: () Delete Title: SECR (X) Change () Addition BOLLES, ROBIN D BOLLES, ROBIN D SECRETA Name: Name: Address: 6247 ST. ANDREWS CIR. N. Address: 6247 ST. ANDREWS CIR. N. FT. MYERS, FL 33919 FT. MYERS, FL 33919 City-St-Zip: City-St-Zip:

Title: SECR (X) Delete Title: () Change () Addition Name: WICKLIFF, WILLIAM R SECRETA Name:

 Name:
 WICKLIFF, WILLIAM R SECRETA
 Name:

 Address:
 6247 ST. ANDREWS CIRCLE
 Address:

 City-St-Zip:
 FORT MYERS, FL 33919
 City-St-Zip:

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: JOHN R BAKOS AGEN 05/11/2007