2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 30, 2007 08:00 AN Secretary of State DOCUMENT # P00000101124 SUNCOAST POOL BARRIER, INC. Principal Place of Business Mailing Address 175 SOUTH JACKSON RD 307 SUNSET RD VENICE, FL 34292 OSPREY, FL 34229 No Chg-P CR2E034 (11/05) 04192007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1049200 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SCULLY, E MICHAEL DO NOT WRITE 307 SUNSET RD OSPREY, FL 34229 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and life if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS **PVS** TITLE SCULLY, E. MICHAEL STREET ADDRESS 307 SUNSET RD CITY-ST-7/P OSPREY, FL 34229 U000007459n3 % % TITLE 105/16/07-80048-008 150100 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CTTY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP

12. I hereby certify that the information supplied with this fifting does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 4

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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