FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 21, 2002 8:00 amg Secretary of State P00000110710 DOCUMENT # 1. Entity Name 05-21-2002 91136 025 ***150.00 FLORIDIAN POOLS BY RICKY, INC. Principal Place of Business Mailing Address 11620 N.W. 56TH DRIVE 11620 N.W. 56TH DRIVE #106 #106 CORAL SPRINGS FL 33076 CORAL SPRINGS FL 33076 2. Principal Place of Business 3. Mailing Address 5036 <u>PEBBLEBROOK WA</u> 5036 PEBBLEBROOK WAY Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1062601 CREEK DONNIT CREGI \mathbf{m} Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent USHER-DAVIS-VICKY USHER-DAVIS, VICKY Street Address (P.O. Box Number is Not Acceptable) 5036 PEBBLEBROOK (C 11620 N.W. 56TH DRIVE #106 **CORAL SPRINGS FL 33076** POCODUT CREEK 8. The above named equity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 1-15-02 DATE ∽SÍGNATURE . (NOTE: Registered Agent signature required when reinstating) or printed name of registered agent and title if applicable 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PRESIDENT Change TITLE Delete TITLE ☐ Addition USHER-DAVIS, VICKY USHER-DAVIS, VICKY NAME NAME 5036 PEBBLEBROOK WAY 11620 N.W. 56TH DRIVE #106 STREET ADDRESS STREET ADDRESS **CORAL SPRINGS FL 33706** LOCONUT CREEK PL 33073 CITY-ST-ZIP CITY-ST-7IP 1- POSSIDENT ☐ Delete TITLE Change ☐ Addition DAVIS, PICKY DAVIS, RICKY L NAME 5036 PERBLEBROOK WAY 11620 N.W. 56TH DRIVE #106 STREET ADDRESS STREET ADDRESS COCOPUT CREEK FL. 33073 CITY-ST-ZIP CORAL SPRINGS FL 33076 CITY-ST-ZIP : Delete :-____Addition_! TITLE TITLE= STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attaching nt with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ Addition

TITLE

NAME

☐ Delete

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIE

NAME

SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Daytime Phone #