## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P01000026952

Title:

Name:

Address:

City-St-Zip:

FILED Nov 04, 2005 Secretary of State

Entity Na	me: NEPTUN	IE POOLS & CONCRETE INC			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
102 NE 5T CAPE CO	TH AVE RAL, FL 3390	9			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
102 NE 5T CAPE CO	TH AVE RAL, FL 3390	9			
FEI Number	: 65-1087083	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
102 NE 5T	, RONALD W 'H AVE RAL, FL 3390	9 US			
The above in the State	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( SCHEALL, ROI 102 NE 5TH AV CAPE CORAL,	/E	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	O ( SCHEALL, LIN 102 NE 5TH AV CAPE CORAL,	/E	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( SCHEALL, RAN 1702 NE 2ND S CAPE CORAL,	STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Title:

Name:

Address:

City-St-Zip:

MGR

SCHEALL, RONALD W JR

102 N.E. 5TH AVE CAPE CORAL, FL 33909 US

( ) Change (X) Addition

SIGNATURE: RONALD WILLIAL SCHEALL SR. **PRES** 11/04/2005

( ) Delete