2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000038251

Entity Name: SEASIDE POOL & SPA, INC.

FILED May 04, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

4536 SE 16TH PLACE

#3 CAPE CORAL, FL 33904

Current Mailing Address: New Mailing Address:

4536 SE 16TH PLACE PO BOX 100689

#3 CAPE CORAL, FL 33910

CAPE CORAL, FL 33904

FEI Number: 52-2299603 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BIALON, KLAUS P
4618 SW 8TH CT
CAPE CORAL, FL 33914 US

HARTLEB, ASTRID P
4635 CORONADO PKWY
SUITE 8

CAPE CORAL, FL 33914 03 CAPE CORAL, FL 33904 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: ASTRID P HARTLEB 05/04/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 BIALON, KLAUS P
 Name:

 Address:
 4618 SW 8TH CT
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33914
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KLAUS BIALON PD 05/04/2006