## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jul 30, 2002 8:00 am Secretary of State P01000045764 DOCUMENT # 1. Entity Name 07-30-2002 90382 031 \*\*\*150.00 POOLADY, INC. Principal Place of Business Mailing Address 7917 JAYWOOD ROAD 7917 JAYWOOD ROAD LARGO FL 34647 LARGO FL 34647 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For <u>59-3722904</u> Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NORDMAN, PHYLLIS Street Address (P.O. Box Number is Not Acceptable) 7917 JAYWOOD ROAD LARGO FL 34647: - -City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE:NOW!!!- FEE IS:\$550.00 -10.-Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May.Be After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NORDMAN, PHYLLIS NAME NAME STREET ADDRESS 7917 JAYWOOD ROAD STREET ADDRESS CITY-ST-ZIP **LARGO FL 34647** CITY-ST-ZIP TITLE 🗓 ☐ Delete TITLE ☐ Change Addition NAME : NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP " CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME

13. Thereby certify that the information supplied with this filling 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 attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

## Attachment P01000045764/

Jo whom it may concern:

This is the first rotice
I have received I was quite
surprised when I opened
the Statement: I am sending
a check for \$150.00

Thank you

Ohlis Nordman

foolady, Inc