

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000058123

FILED
Mar 28, 2005
Secretary of State

Entity Name: CLEAR BLUE POOL CARE, INC.

Current Principal Place of Business:

805 WINONA DRIVE
GENEVA, FL 32972

New Principal Place of Business:

805 WINONA DRIVE
GENEVA, FL 32732

Current Mailing Address:

805 WINONA DRIVE
GENEVA, FL 32972

New Mailing Address:

805 WINONA DRIVE
GENEVA, FL 32732

FEI Number: 59-3724647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWART, CHRISTINE
805 WINONA DRIVE
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

SWART, CHRISTINE
805 WINONA DRIVE
GENEVA, FL 32732 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:

03/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SWART, CHRISTINE
Address: 805 WINOMA DRIVE
City-St-Zip: GENEVA, FL 32792

Title: VP () Delete
Name: SWART, DAVID
Address: 805 WINOND DR
City-St-Zip: GENEVA, FL 32732

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SWART, CHRISTINE
Address: 805 WINONA DRIVE
City-St-Zip: GENEVA, FL 32732

Title: VP (X) Change () Addition
Name: SWART, DAVID
Address: 805 WINONA DR
City-St-Zip: GENEVA, FL 32732

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.

SIGNATURE: CHRISTINE SWART

P

03/28/2005

Electronic Signature of Signing Officer or Director

Date