2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000075914

Entity Name: SLUSSER POOLS, INC.

FILED Jan 17, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4148 CORPORATE SQUARE STE 4148 CORPORATE SQUARE NAPLES, FL 34104 NAPLES, FL 34104 **Current Mailing Address: New Mailing Address:** 4148 CORPORATE SQUARE 4148 CORPORATE SQUARE NAPLES, FL 34104 NAPLES, FL 34104 US FEI Number: 65-0442677 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SLUSSER, KENNETH FIDLER, JAMIE D 4148 CORPORATE SQUARE 4148 CORPORATE SQUARE NAPLES, FL 34104 US NAPLES, FL 34104 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: JAMIE FIDLER 01/17/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: (X) Change () Addition PSD () Delete Title: **PSD** Name: SLUSSER, KENNETH Name: FIDLER, JAMIE D 4148 CORPORATE SQUARE 4148 CORPORATE SQUARE, SUITE A Address: Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34104 US Title: () Delete Title: VΡ () Change (X) Addition Name: Name: SLUSSER. KENETH 4148 CORPORATE SQUARE, SUITE A Address: Address: NAPLES, FL 34104 US City-St-Zip: City-St-Zip: Title: () Change (X) Addition Title: () Delete FIDLER, MONICA A Name: Name: 4148 CORPORATE SQUARE, SUITE A Address Address: City-St-Zip: City-St-Zip: NAPLES, FL 34104 US Title: () Delete Title: SEC () Change (X) Addition FIDLER, MONICA A Name: Name: 4148 CORPORATE SQUARE, SUITE A Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 34104 US

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: JAMIE FIDLER PSD 01/17/2007