2004 FOR PROFIT CORPORATION ANNUAL REPORT

Aug 04,-2004 08:00 AM Secretary of State DOCUMENT # P01000093286 1. Entity Name R.D. POOL SALES INC. Principal Place of Business Mailing Address 553 SOUTH EAST 23RD STREET 553 SOUTH EAST 23RD STREET VERO BEACH, FL 32962 VERO BEACH, FL 32962 07282004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 59-3746439 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required B. Name and Address of Current Registered Agent DEBERRY, ROBIN L DO NOT WRITE 553 SOUTH EAST 23RD STREET VERO BEACH, FL 32962 IN THIS SPACE 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. Lam terriliar 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 FILE NOW!!! FEE IS \$150.90 P. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 8, 2004 Added to Fees corporation did not receive the prior notice. 10 OFFICERS AND DIRECTORS TIRLE DEBERRY, ROBIN L NAME 553 SOUTH EAST 23RD STREET STREET ADDRESS CHY-SI-ZIP VERO BEACH, FL 32962 U00000169358 THEE 08/04/04-80004-014 150.00 DEBERRY, DAVID D NAME STREET ADDRESS 553 SOUTH EAST 23RD STREET CITY-ST-ZIP VERO BEACH, FL 32962 NAME STREET ACORESS DO NOT WRITE CITY-ST-ZIP STEE IN THIS SPACE STREET ADDRESS

12. I heroby certify that the information supplied with this filing 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 officor or director of the corporation or the receiver of the tastee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CHY-ST-ZIP

STREET ADDRESS CITY:ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

HATUHE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/29/04 32, 4433

FILED