

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000104041

Entity Name: DOWN ISLAND POOLS, INC.

FILED  
Apr 29, 2007  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 111293  
NAPLES, FL 341080122

## New Principal Place of Business:

163 FAIRWAY CIRCLE  
NAPLES, FL 34110

## Current Mailing Address:

P.O. BOX 111293  
NAPLES, FL 341080122

## New Mailing Address:

FEI Number: 65-1151643      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GREENFELD ROBERT,  
163 FAIRWAY CR  
NAPLES, FL 34110      US

## Name and Address of New Registered Agent:

GREENFELD, ROBERT  
163 FAIRWAY CR  
NAPLES, FL 34110      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: ROBERT M. GREENFELD

04/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS      ( ) Delete  
Name: GREENFELD, ROBERT  
Address: 163 FAIRWAY CIRCLE  
City-St-Zip: NAPLES, FL 34110

Title: VT      ( ) Delete  
Name: RANS, VICTORIA  
Address: 163 FAIRWAY CIRCLE  
City-St-Zip: NAPLES, FL 34110

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: VICTORIA RANS

VT

04/29/2007

Electronic Signature of Signing Officer or Director

Date