

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000107479

1. Entity Name
PRESIDENTIAL POOL'S INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 MAR -1 AM 8:00

REINSTATEMENT 03-04



Principal Place of Business
800 S W 3RD STREET
BOCA RATON FL 33486

Mailing Address
800 S W 3RD STREET
BOCA RATON FL 33486

2. Principal Place of Business

P.O. Box 273241

3. Mailing Address

P.O. Box 273241

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

MRS

City & State
BOCA RATON FL.

City & State
BOCA RATON FL.

4. FEI Number 81-0546634

Applied For
Not Applicable

Zip 33427

Country PB

Zip 33427

Country PB

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LENNON, MICHAEL
800 S W 3RD STREET
BOCA RATON FL 33486

Name ~~MICHAEL LENNON~~
Street Address ~~P.O. Box 273241~~
City ~~BOCA RATON~~ FL 33427

← SAVE →

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

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME LENNON, MICHAEL J
STREET ADDRESS 800 S W 3RD STREET
CITY-ST-ZIP BOCA RATON FL 33486 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
700026160617
01/05/04--01057--010 **150.00

TITLE VD
NAME ~~LENNON, MICHAEL J~~
STREET ADDRESS ~~800 S W 3RD STREET~~
CITY-ST-ZIP ~~BOCA RATON FL 33486~~ ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
700026160617
03/12/04--01015--004 **158.75

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

0091678 AV

Attachment
MICHAEL LANNON
2003 UBR
272
#P01000107479
PRESIDENTIAL POOLS INC

I HAVE JUST RECEIVED

THE THIRD FORM AND

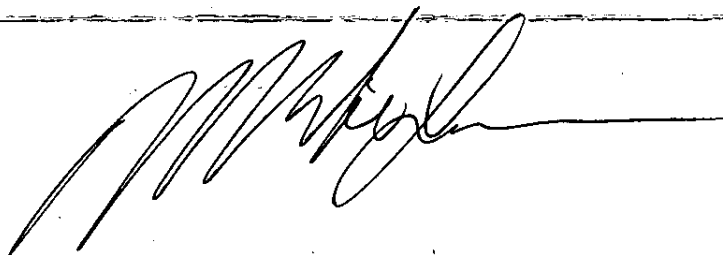
NOT THE FIRST TWO

I AM REMITTING 150.00

FOR REINSTATEMENT OF

CONP.

THANK YOU



PLRES.

PRESIDENT POOLS INC