

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000111503

FILED
Feb 08, 2004
Secretary of State

Entity Name: ALL-PRO POOLS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

471 WELLESLEY ST
OVIEDO, FL 32765 US

New Principal Place of Business:

1515 W. BROADWAY ST
OVIEDO, FL 32765 US

Current Mailing Address:

1809 E. BROADWAY STREET
#317
OVIEDO, FL 32765 US

New Mailing Address:

1515 W. BROADWAY STREET
OVIEDO, FL 32765 US

FEI Number: 30-0002571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPITULSKI, ROBERT M
471 WELLESLEY ST
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MR. () Delete
Name: SPITULSKI, ROBERT M P/S/T
Address: 2936 MAPLE GROVE PLACE
City-St-Zip: OVIEDO, FL 32765 US

Title: MR () Delete
Name: SPITULSKI, JOHN R VP
Address: 1130 CHASE DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change () Addition
Name: SPITULSKI, ROBERT M P/S/VP
Address: 2936 MAPLE GROVE PLACE
City-St-Zip: OVIEDO, FL 32765 US

Title: MR (X) Change () Addition
Name: ANDERSON, MIKE T T
Address: 1515 W BROADWAY ST
City-St-Zip: OVIEDO, FL 32765 US

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: ROBERT M SPITULSKI

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02/08/2004

Electronic Signature of Signing Officer or Director

Date