

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # P01000115689

1. Entity Name
CRYSTAL CLEAR POOL SERVICE, INC.



Principal Place of Business

861 HIGHLAND CIR
NOKOMIS, FL 34275

Mailing Address

861 HIGHLAND CIR
NOKOMIS, FL 34275



04232007 No Chg-P CR2E034 (11/05)

4. FEI Number
80-0021699

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LOVREY, MARK
861 HIGHLAND CIRCLE
NOKOMIS, FL 34275

**DO NOT WRITE
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. 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 \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	LOVREY, MARK
STREET ADDRESS	861 HIGHLAND CIRCLE
CITY-ST-ZIP	NOKOMIS, FL 34275

TITLE	VS
NAME	LOVRY, LORETTA
STREET ADDRESS	861 HIGHLAND CIRCLE
CITY-ST-ZIP	NOKOMIS, FL 34275

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000744806
05/16/07-80003-020 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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-TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/07