

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000119057

Entity Name: MAJESTIC POOL SERVICES, INC.

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2940 S HORSEHOE DR  
# 500  
NAPLES, FL 341046148

**New Principal Place of Business:**

**Current Mailing Address:**

2940 S HORSEHOE DR  
# 500  
NAPLES, FL 341046148

**New Mailing Address:**

FEI Number: 59-3761181

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WEHR, GARY  
7040 PELICAN BAY BLVD., #D-504  
NAPLES, FL 34108 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

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: WEHR, GARY  
Address: 7040 PELICAN BAY BLVD., #D-504  
City-St-Zip: NAPLES, FL 34108

Title: DVPT  
Name: WEHR, DIANNE  
Address: 7040 PELICAN BAY BLVD., #D-504  
City-St-Zip: NAPLES, FL 34108

I hereby 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 all other like empowered.

SIGNATURE: GARY V. WEHR

MR.

03/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date