

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000122485

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: FUN TIME POOL SERVICES, INC.

## Current Principal Place of Business:

4416 BEECHWOOD LAKE DR.  
NAPLES, FL 34112 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 110026  
NAPLES, FL 34108 US

## New Mailing Address:

FEI Number: 01-0577541

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TORRES, JORGE L  
4416 BEECHWOOD LAKE DR.  
NAPLES, FL 34112 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: P ( ) Delete  
Name: TORRES, JORGE L  
Address: 4416 BEECHWOOD LAKE DR.  
City-St-Zip: NAPLES, FL 34112 US

Title: V ( ) Delete  
Name: TORRES, JORGE O  
Address: 5353 23TH AVE SW  
City-St-Zip: NAPLES, FL 34116 US

Title: V ( ) Delete  
Name: RUBIN, GARY M  
Address: 18 FAIRWAY DRIVE  
City-St-Zip: BRADFORD, MA 01835 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: JORGE L. TORRES

P

04/30/2005

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

\_\_\_\_\_  
Date