


2008 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 07, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000000508
 1. Entity Name
KLEAR POOLS, INC.



Principal Place of Business Mailing Address
30 DOUGLAS STREET **POB 5081**
HOMOSSASSA, FL 34446 **SPRING HILL, FL 34611**

DO NOT WRITE IN THIS SPACE



04032008 No Chg-P CR2E034 (11/05)

4. FEI Number 69-0011108	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
GRIFFIN, HENRY F
6875 W AVOCADO ST
CRYSTAL RIVER, FL 34429

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Henry F. Griffin - President* *[Signature]* **4-4-08**
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, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPTS GRIFFIN, HENRY F 30 DOUGLAS STREET HOMOSSASSA, FL 34446
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 04/17/08-80040-025 150.00

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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]* **Henry F. Griffin** **4-4-08** **352-796-2120**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #