

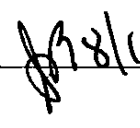


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P02000012031</b> 1. Entity Name <b>CRYSTAL KOOL POOLS, INC.</b>						FILED 05 AUG -1 AM 10:16 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business <b>1147 NE 17TH ROAD OCALA, FL 34470</b>				Mailing Address <b>1147 NE 17TH ROAD OCALA, FL 34470</b>			
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip	Country				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
<b>KESSEL, RON 3701 SE 33 COURT OCALA, FL 34471</b>				Name <b>Ron Kessel</b> Street Address (P.O. Box Number is Not Acceptable) <b>1147 NE 17th Rd</b> <b>Ocala FL 34470</b> City <b>FL</b> Zip Code			
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 <u>Ronald Kessel</u> <u>Ronald Kessel</u> <u>7/21/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
<b>FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <b>KESSEL, RON</b> <b>3701 SE 33 COURT</b> <b>OCALA, FL 34471</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <b>KESSEL, Ron</b> <b>10740 NE Hwy 314</b> <b>Silver Springs FL 34488</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST <b>KESSEL, PAT</b> <b>3701 SE 33 COURT</b> <b>OCALA, FL 34471</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST <b>Kessel, PAT</b> <b>10740 NE HWY 314</b> <b>Silver Springs FL 34488</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV <b>KESSEL, SCOTT</b> <b>3701 SE 33 COURT</b> <b>OCALA, FL 34471</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV <b>KESSEL, SCOTT</b> <b>2300 SE 15th Ave</b> <b>OCALA FL 34471</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200058199072 08/03/05--01050--016 **150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify 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 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 <u>Ronald Kessel</u> <u>Ronald L. Kessel</u> <u>7/21/05</u> <u>352 694-4015</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>							



1447 N.E. 17<sup>TH</sup> ROAD

OCALA, FLORIDA 34470

JULY 20, 2005

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee Florida 32314

Sean Toner:

Our regrets for not sending this in before now, but unfortunately have never recieved this 2005 FOR PROFIT CORPORATION ANNUAL REPORT, until today. We moved from our old address last year and the postal service has not forwarded all our mail.

Sincerely

Patricia Kessel  
Secretary/Treasurer

PHONE 352-694-4019

FAX 352 629-7699

MOBILE 352-266-3603  
352-266-3903