


**2005 FOR PROFIT CORPORATION
- ANNUAL REPORT**


FILED
May 09, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000023721
1. Entity Name
PRISTINE POOL AND SPA SUPPLY, INC.



Principal Place of Business Mailing Address
408 GARRISON AVE. 408 GARRISON AVE.
PORT ST. JOE, FL 32456 PORT ST. JOE, FL 32456

DO NOT WRITE IN THIS SPACE



04272005 No Chg-P CR2E034 (10/03)

4. FEI Number 04-3611031	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
DEPUY, TIM
408 GARRISON AVE.
PORT ST. JOE, FL 32456

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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 _____ DATE _____
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when re-appointing)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 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	VD WEATHERLY, MARGARET 1344 MOSSWOOD CHASE TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DEPUY, TIM 167 POST OFFICE LANE PORT ST. JOE, FL 32456
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05/09/05-80016-014 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 empowerers.

SIGNATURE: Tim DePuy Date: 4/30/05 Daytime Phone #: (850) 229-7465
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR