

2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 04, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000038048**

1. Entity Name  
JIM'S CLEAN & CLEAR POOL SERVICE, INC.



Principal Place of Business  
215 PELICAN AVENUE  
DAYTONA BEACH, FL 32118

Mailing Address  
215 PELICAN AVENUE  
DAYTONA BEACH, FL 32118



03312005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
04-3650831

Applied For
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

SPIN, JAMES A  
215 PELICAN AVENUE  
DAYTONA BEACH, FL 32118

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**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

1000000286984  
04/04/05-80050-002 150.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SPIN, JAMES A 215 PELICAN AVE DAYTONA BEACH, FL 32118
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IN THIS SPACE**

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: James A. Spin JAMES A. SPIN 4-1-05 386 257-0347  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Time Phone #