2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000047754

Entity Name: HS POOL, CARE, INC.

FILED Apr 29, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

55 UNCLE PETE RD HAINES CITY, FL 33844

Current Mailing Address: New Mailing Address:

55 UNCLE PETE RD HAINES CITY, FL 33844

FEI Number: 01-0679544 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SANDOVAL, HENRY 55 UNCLE PETE RD HAINES CITY, FL 33844 US

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.

ili the State of Florid

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD

 Name:
 SANDOVAL, HERNY

 Address:
 55 UNCLE PETE RD

 City-St-Zip:
 HAINES CITY, FL 33844

I hereby 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 all other like empowered.

SIGNATURE: HENRY SANDOVAL PSTD 04/29/2010