


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 07, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000049536</b> 1. Entity Name DAN GANDEE POOLS, INC.	
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Principal Place of Business 4360 W SOUTHERN ST LECANTO, FL 34461	Mailing Address 4360 W SOUTHERN ST LECANTO, FL 34461
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**DO NOT WRITE IN THIS SPACE**



04052004 No Chg-P CR2E034 (10/03)

4. FEI Number 75-3057852	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

GANDEE, DAN  
4360 W SOUTHERN ST  
LECANTO, FL 34461

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

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$350.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	1100000105043
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT GANDEE, DAN 4360 W SOUTHERN ST LECANTO, FL 34461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS GANDEE, MARY 4360 W SOUTHERN ST LECANTO, FL 34461
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IN THIS SPACE**

04/07/04-80009-004 150.00

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 empowered.

**SIGNATURE:**  **DAN GANDEE** 04/06/04 (352) 527-2727  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #