

# 2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000063872

**FILED**  
**May 14, 2012**  
**Secretary of State**

**Entity Name:** POOL CARE BY WEIDENHAMER INCORPORATED

**Current Principal Place of Business:**

1678 N. WOODLAND BLVD  
DELAND, FL 32720

**New Principal Place of Business:**

1678 N. WOODLAND BLVD  
SUITE A  
DELAND, FL 32720

**Current Mailing Address:**

1678 N. WOODLAND BLVD  
DELAND, FL 32720

**New Mailing Address:**

1678 N. WOODLAND BLVD  
SUITE A  
DELAND, FL 32720

**FEI Number:** 59-3199767

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEIDENHAMER, JEFFREY  
1678 N. WOODLAND BLVD  
SUITE A  
DELAND, FL 32720 US

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

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.

SIGNATURE: JEFF WEIDENHAMER

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WEIDENHAMER, JEFFREY  
Address: 1107 WOOD LAKE TERR  
City-St-Zip: DELAND, FL 32720

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: JEFF WEIDENHAMER

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

05/14/2012

\_\_\_\_\_  
Date