

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90362 042 ***150.00

DOCUMENT # P02000090571 1. Entity Name NATIONAL POOL AND SPA SUPPLY, INC.			
Principal Place of Business 7490 GRISSOM PARKWAY COCOA, FL 32927		Mailing Address 7490 GRISSOM PARKWAY COCOA, FL 32927	
2. Principal Place of Business 6849 Sweet Bay Ct <small>Suite, Apt. #, etc.</small>		3. Mailing Address 6849 Sweet Bay Ct <small>Suite, Apt. #, etc.</small>	
City & State Port St John, FL <small>Zip</small> 32927 <small>Country</small>		City & State Port St John, FL <small>Zip</small> 32927 <small>Country</small>	
4. FEI Number 42-1549274		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RITTENHOUSE, CAROLINE 6849 SWEETBAY CT. PORT ST. JOHN, FL 32927		7. Name and Address of New Registered Agent ACCURATE ACCOUNTING OF TITUSVILLE, INC. 3910 S. WASHINGTON AVE., 101N TITUSVILLE, FL 32780	
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: <u><i>Caroline Rittenhouse</i></u> 4-18-05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete RITTENHOUSE, SCOTT 6849 SWEETBAY CT. PORT ST. JOHN, FL 32927	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete RITTENHOUSE, CAROLINE 6849 SWEETBAY CT. PORT ST. JOHN, FL 32927	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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)(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: <u><i>Caroline Rittenhouse</i></u> <i>Caroline Rittenhouse</i> 4-18-05 321690-0890 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			

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