

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000106323

Entity Name: BILLY'S POOL SERVICE, INC.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

1133 HAMLET COURT
JACKSONVILLE, FL 32266

New Principal Place of Business:

5379 GOLF COURSE DR.
JACKSONVILLE, FL 32277

Current Mailing Address:

P.O. BOX 11501
JACKSONVILLE, FL 32239

New Mailing Address:

FEI Number: 01-0718584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSES, BILLY T
1133 HAMLET CT
JACKSONVILLE, FL 32266 US

Name and Address of New Registered Agent:

MOSES, BILLY T
5379 GOLF COURSE DR.
JACKSONVILLE, FL 32277 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.

SIGNATURE: BILLY MOSES

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOSES, BILLY T
Address: P.O. BOX 11501
City-St-Zip: JACKSONVILLE, FL 32239

Title: O () Delete
Name: MOSES, TAMMY
Address: P.O. BOX 11501
City-St-Zip: JACKSONVILLE, FL 32239

Title: O () Delete
Name: MOSES, MATTHEW T
Address: P.O. BOX 11501
City-St-Zip: JACKSONVILLE, FL 32239

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BILLY MOSES

D

04/16/2009

Electronic Signature of Signing Officer or Director

Date