


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

~~00500016522~~ **PS 182**

DOCUMENT # 002000115529	
1. Entity Name B + L POOL SERVICE INC.	

FILED
05 MAY -3 AM 8:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA


REINSTATEMENT 03-05
DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 13722 80th LN N		3. Mailing Address 13722 80th LN N	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State West Palm Bch FL	City & State West Palm Bch FL	4. FEI Number 46-0504455	Applied For <input type="checkbox"/> Not Applicable
Zip 33412	Country Palm Bch	Zip 33412	Country Palm Bch

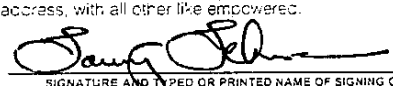
DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent	
Name James J Donovan	
Street Address (P.O. Box Number is Not Acceptable) 3830 Jog Road	
City Lake Worth	FL Zip Code 33467

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

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
--	---

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT LARRY L. LEHMAN 13722 80th LN N West Palm Bch FL 33412	TITLE NAME STREET ADDRESS CITY - ST - ZIP	000054520650 05/13/05--01059--006 **450.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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 on an attachment with an address, with all other like empowered.	
SIGNATURE:  LARRY LEHMAN	Date 3-21-05

CR2E034B (12/02)

JAMES J DONOVAN C.P.A., P.A.
3830 JOG ROAD
LAKE WORTH , FLORIDA 33467
PHONE: (561) 641-9550 FAX : (561) 641-4781

April 26, 2005

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE FL 32314

RE : LETTER NUMBER 805A00022304

WE HAVE RECEIVED YOUR LETTER NUMBER 805A00022304 .

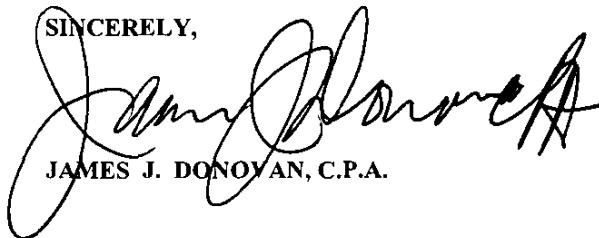
PLEASE BE ADVISE OF THE FOLLOWING FACTS AND CIRCUMSTANCES REGARDING
FILING OF THE ABOVE FORM.

THE TAXPAYER DID NOT RECEIVE THE UNIFORM BUSINESS REPORT AND HAD
NO KNOWLEDGE OF THE FILING REQUIREMENTS. THEREFORE, WE BELIEVE
REASONABLE CAUSE EXIST FOR YOU TO REACTIVATE THE CORPORATION.

WE HAVE ENCLOSED A COMPLETED 2004 & 2005 UNIFORM BUSINESS REPORTS ALONG
WITH A CHECK FOR \$ 450.00, FOR THE FILING FEES.

IF YOU HAVE ANY QUESTIONS ON THE ABOVE, PLEASE FEEL FREE TO
CONTACT MY OFFICE.

SINCERELY,

A handwritten signature in black ink, appearing to read "James J. Donovan", is written over the word "SINCERELY," and the printed name below it. The signature is fluid and cursive, with a large loop at the end.

JAMES J. DONOVAN, C.P.A.