

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2003 8:00 am
Secretary of State

03-07-2003 90117 029 ***150.00

DOCUMENT # P02000123438

1. Entity Name
PROFESSIONAL POOLS & CUSTOM CONCRETE, INC.



Principal Place of Business
**17329 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH FL 32413**

Mailing Address
**POST OFFICE BOX 9790
PANAMA CITY BEACH FL 32413**

2. Principal Place of Business
17329 P.C. Bch, PKWY
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Panama City Bch, FL
Zip
32413 Country
Bay

City & State
Zip
Country

4. FEI Number
51-0438375 Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HAWKINS, JOHN W ESQ.
607 HIGHWAY 98 EAST
DESTIN FL 32541**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$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	Stephen L. Bowles <input type="checkbox"/> Delete P.O. Box 9790 - President Panama City Bch, FL 32417
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Cynthia A. Bowles <input type="checkbox"/> Delete P.O. Box 9790 Secretary Panama City Bch, FL 32417
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LaCinda M. Bowles <input type="checkbox"/> Delete P.O. Box 9790 Officer Panama City Bch, FL 32417
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Stephen L. Bowles Jr <input type="checkbox"/> Delete P.O. Box 9790 Officer Panama City Bch, FL 32417
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

Cynthia A Bowles **3-5-03**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2034 (10/02)

860-236-0938