

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

8/12/2003-90020-004-\$150.00-\$150.00

*Page 1 of 2*

DOCUMENT # **P02000125389**

1. Entity Name  
**LEROY'S POOLS AND PATIOS INC.**



FILED

03 NOV 14 PM 3:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**885 CAMPELLO STREET  
ALTAMONTE SPRINGS FL 32701**

Mailing Address  
**885 CAMPELLO STREET  
ALTAMONTE SPRINGS FL 32701**



2. Principal Place of Business

3. Mailing Address

☐ CHECK HERE IF MAKING CHANGES

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**562302553**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**RELIFORD, LEROY J  
885 CAMPELLO STREET  
ALTAMONTE SPRINGS FL 32701**

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 \$550.00**

**After September 10, 2003 Fee will be \$750.00**

**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	<b>Leroy's Pools &amp; Patios</b> <input type="checkbox"/> Delete <b>885 Campello St</b> <b>Altamonte Springs FL 32701</b>
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"/> Delete
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	<b>President</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>Leroy Reliford</b> <b>885 Campello Street</b> <b>Altamonte Springs, FL 32701</b>
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
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
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:

**Leroy Reliford**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**8-8-03**

**407-831-5087**  
Daytime Phone #

CR2E034 (4/03)

Attachments#

86137953

PO2000125389

Page 2

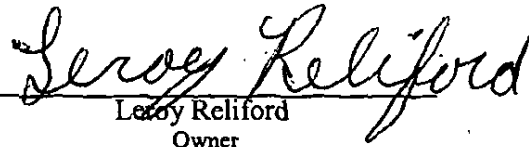
August 8, 2003

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Leroy's Pools & Patios, Inc  
FEIN: 56-2302553

To whom it may concern,

I incorporated Leroy's Pools & Patios, Inc in November, 2002. This is my first time owning a corporation and with them is a lot to learn. I have tried very hard to keep up with all the regulations necessary with this corporation. I have just received in the mail my 2003 Profit Corporation Annual Report stating 2ND NOTICE. This is the first notice I have ever received. I did not know about this report therefore did not know to call when I did not receive one. I am sending a check for the original \$150.00 filing fee with the hope that you can understand my dilemma. If you have any further questions, please do not hesitate to contact me at (407)831-5087. I apologize for any inconvenience. Thank you for your cooperation.

  
Leroy Reliford  
Owner