

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015416

FILED  
Apr 28, 2004  
Secretary of State

Entity Name: SUNSHINE POOL SERVICE OF TAMPA BAY, INC.

## Current Principal Place of Business:

13155 ROYAL GEORGE ST  
ODESSA, FL 33556

## New Principal Place of Business:

5409 N. NEBRASKA AVE  
TAMPA, FL 33604

## Current Mailing Address:

13155 ROYAL GEORGE ST  
ODESSA, FL 33556

## New Mailing Address:

5409 N NEBRASKA AVE  
TAMPA, FL 33604

FEI Number: 27-0045130

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANDREWS, SCOTT M  
13155 ROYAL GEORGE ST  
ODESSA, FL 33556 US

## Name and Address of New Registered Agent:

ANDREWS, SCOTT M  
5409 N NEBRASKA AVE  
TAMPA, FL 33604 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: \_\_\_\_\_

04/28/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ANDREWS, CHRISS  
Address: 500 HOLLEY ST  
City-St-Zip: BROCKPORT, NY 14420

Title: D ( ) Delete  
Name: ANDREWS, SCOTT M  
Address: 13155 ROYAL GEORGE ST  
City-St-Zip: ODESSA, FL 33556

Title: D ( ) Delete  
Name: ANDREWS, TODD A  
Address: 502 S FREEMONT AVE APT 607  
City-St-Zip: TAMPA, FL 33606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: ANDREWS, TODD A  
Address: 10015 TRANQUILITY WAY  
City-St-Zip: TAMPA, FL 33635

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SCOTT M ANDREWS

PRES

04/28/2004

Electronic Signature of Signing Officer or Director

Date