2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000031536

Entity Name: FIBERGLASS SWIMMING POOLS, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1637 W. GULF TO LAKE HWY LECANTO, FL 34461

Current Mailing Address: New Mailing Address:

1637 W. GULF TO LAKE HWY LECANTO, FL 34461

FEI Number: 20-4054649 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BATTERSON, JOSHUA M BATTERSON, RAEGAN L 1637 W. GULF TO LAKE HWY 1637 W. GULF TO LAKE HWY LECANTO, FL 34461 LECANTO, FL 34461

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: RAEGAN L BATTERSON 04/30/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition BATTERSON, JOSHUA M BATTERSON, RAEGAN L Name: Name: 519 S. LEONA AVENUE 519 S. LEONA AVENUE Address: Address:

LECANTO, FL 34461 US City-St-Zip: LECANTO, FL 34461 US

Title: Title: () Delete (X) Change () Addition THACHER, KELLY J Name: BATTERSON, JOSHUA M Name: 519 S. LEONA AVENUE 525 S. LEONA AVENUE Address: Address:

LECANTO, FL 34461 US LECANTO, FL 34461 US City-St-Zip: City-St-Zip:

() Delete (X) Change () Addition BATTERSON, JOSHUA M BUTLER, MICHELLE R Name: Name: 519 S. LEONA AVENUE 2665 E. JUPITER STREET Address: Address: City-St-Zip: LECANTO, FL 34461 US City-St-Zip: INVERNESS, FL 34453 US

Title: () Delete Title: () Change (X) Addition

NOBLES, NICOLE M Name: Name: Address: Address: 8226 OX EYE PLACE City-St-Zip: City-St-Zip: HOMOSASSA, FL 34448 US

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.

Title:

Ρ SIGNATURE: RAEGAN L BATTERSON 04/30/2007