

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000034892

FILED  
Feb 16, 2005  
Secretary of State

Entity Name: WILLIS FAMILY POOLS, INC.

**Current Principal Place of Business:**

616 N HIGH ST  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

616 N HIGH ST  
DELAND, FL 32720

**New Mailing Address:**

FEI Number: 59-3044871

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FENDT, FRED W  
112-A W NEW YORK AVE  
DELAND, FL US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WILLIS, CLARE JEAN  
Address: 616 N HIGH ST  
City-St-Zip: DELAND, FL 32720

Title: VP ( ) Delete  
Name: WILLIS, SHANE D  
Address: 616 N. HIGH ST  
City-St-Zip: DELAND, FL 32720

Title: ST ( ) Delete  
Name: CROET, DAVID  
Address: 657 HARPER RD.  
City-St-Zip: PIERSON, FL 32180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: ST (X) Change ( ) Addition  
Name: SMITH, SHAWN  
Address: 616 N HIGH ST  
City-St-Zip: DELAND, FL 32720

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: CLARE JEAN WILLIS

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02/16/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date