2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2005
Secretary of State

DOCUMENT# P03000079162

Entity Name: SYLVESTER POOLS INC

Current Principal Place of Business:

119 TOLLGATE TRAIL
LONGWOOD, FL 32750

New Principal Place of Business:

134 DES PINAR LANE
LONGWOOD, FL 32750

Current Mailing Address:

119 TOLLGATE TRAIL
LONGWOOD, FL 32750

New Mailing Address:

134 DES PINAR LANE
LONGWOOD, FL 32750

FEI Number: 32-0085491 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MICHAEL, SYLVESTER A JR
119 TOLLGATE TRAIL
LONGWOOD, FL 32750 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: PRES ( ) Delete
Name: SYLVESTER, MICHAEL A JR
Address: 119 TOLLGATE TRAIL
City-St-Zip: LONGWOOD, FL 32750 US

Title: VP ( ) Delete
Name: SYLVESTER, MICHAEL A SR
Address: 119 TOLLGATE TRAIL
City-St-Zip: LONGWOOD, FL 32750 US

Title: VP ( ) Delete
Name: HERNANDEZ, DAVID A
Address: 9105 PLANTATION LAKES CIR
City-St-Zip: SANFORD, FL 32771 US

Title: VP (X) Delete
Name: SMITH, JOSEPH H
Address: 372 KNIGHTS COURT
City-St-Zip: LAKE MARY, FL 32746 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MICHAEL A SYLVESTER JR PRES 03/25/2005
Electronic Signature of Signing Officer or Director Date