# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 12, 2006**
**Secretary of State**

DOCUMENT# P03000081411

**Entity Name:** APOLLO POOL & SPA SERVICES, INC.

**Current Principal Place of Business:**

1696 VELMA DR S
LARGO, FL 33770

**New Principal Place of Business:**

1696 VELMA DR S
LARGO, FL 33770 US

**Current Mailing Address:**

P.O. BOX 8838
MADEIRA BEACH, FL 33738

**New Mailing Address:**

P.O. BOX 8838
MADEIRA BEACH, FL 33738 US

**FEI Number: 20-0096915** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

ADAMS, JOSHUA
1696 VELMA DR S
LARGO, FL 33770 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: PST ( ) Delete
Name: ADAMS, JOSHUA
Address: 1696 VELMA DR S
City-St-Zip: LARGO, FL 33770

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

Title: PST (X) Change ( ) Addition
Name: ADAMS, JOSHUA K
Address: 1696 VELMA DR S
City-St-Zip: LARGO, FL 33770

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: JOSHUA K. ADAMS PST 03/12/2006

Electronic Signature of Signing Officer or Director Date