2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000096018

FILED Apr 14, 2005 Secretary of State

Entity Name: PLANET POOL CARE, INC. **Current Principal Place of Business: New Principal Place of Business:** 6005 N WICKHAM ROAD MELBOURNE, FL 32940 **Current Mailing Address: New Mailing Address:** 445 LAVETA DRIVE WEST MELBOURNE, FL 32904 FEI Number: 03-0528617 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: CAMPBELL, THOMAS G CAMPBELL, THOMAS G 445 LAVETÁ DRIVE 445 LAVETA DRIVE WEST MELBOURNE, FL 32940 US WEST MELBOURNE, FL 32904 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: 04/14/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition CAMPBELL, THOMAS G PRES Name: Name: 445 LAVETA DRIVE Address: Address: City-St-Zip: WEST MELBOURNE, FL 32904 City-St-Zip: Title: () Delete Title: () Change () Addition CAMPBELL, AMY L V.P. Name: Name: 445 LAVETA DRIVE Address: Address: WEST MELBOURNE, FL 32904 City-St-Zip: 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: THOMAS CAMPBELL **PRES** 04/14/2005