

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000119629

FILED  
Jun 01, 2004  
Secretary of State

Entity Name: PARADISE CUSTOM POOLS OF SOUTHWEST FLORIDA, INC.

## Current Principal Place of Business:

4403 SE 16TH PLACE  
SUITE 2  
CAPE CORAL, FL 33904

## New Principal Place of Business:

## Current Mailing Address:

4403 SE 16TH PLACE  
SUITE 2  
CAPE CORAL, FL 33904

## New Mailing Address:

FEI Number: 20-0336170

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KNIGHT, CHRISTOPHER S  
4403 SE 16TH PLACE  
SUITE 2  
CAPE CORAL, FL 33904 US

## Name and Address of New Registered Agent:

WALKOS, GERALD  
4403 SE 16TH PLACE  
SUITE 2  
CAPE CORAL, FL 33904 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: GERALD WALKOS

06/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KNIGHT, CHRISTOPHER S  
Address: 4403 SE 16TH PLACE, SUITE 2  
City-St-Zip: CAPE CORAL, FL 33904

Title: VP ( ) Delete  
Name: KNIGHT, CHRISTOPHER S  
Address: 4403 SE 16TH PLACE, SUITE 2  
City-St-Zip: CAPE CORAL, FL 33904

Title: SEC (X) Delete  
Name: KNIGHT, CHRISTOPHER S  
Address: 4403 SE 16TH PLACE, SUITE 2  
City-St-Zip: CAPE CORAL, FL 33904

Title: TR (X) Delete  
Name: KNIGHT, CHRISTOPHER S  
Address: 4403 SE 16TH PLACE, SUITE 2  
City-St-Zip: CAPE CORAL, FL 33904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: WALKOS, GERALD  
Address: 4403 SE 16TH PLACE, SUITE 2  
City-St-Zip: CAPE CORAL, FL 33904

Title: T (X) Change ( ) Addition  
Name: FORZLEY, MARY C  
Address: 4403 SE 16TH PLACE, SUITE 2  
City-St-Zip: CAPE CORAL, FL 33904

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: GERALD WALKOS

D

06/01/2004

Electronic Signature of Signing Officer or Director

Date