2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2008
Secretary of State

DOCUMENT# P03000122907

Entity Name: POOLE PROPERTIES,INCORPORATED

Current Principal Place of Business:

1580 SW HARBOUR ISLES CIRCLE
PORT ST. LUCIE, FL 34986 US

New Principal Place of Business:

Current Mailing Address:

1580 SW HARBOUR ISLES CIRCLE
PORT ST. LUCIE, FL 34986 US

New Mailing Address:

FEI Number: 55-0849807 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REDDISH, SHERYL P
1580 SW HARBOUR ISLES CIRCLE
PORT ST. LUCIE, FL 34986 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: P ( ) Delete
Name: REDDISH, SHERYL P
Address: 1580 SW HARBOUR ISLES CICLE
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: VP ( ) Delete
Name: ANNIS, WENDY
Address: 1627 SW HARBOUR ISLES CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: SEC ( ) Delete
Name: HILL, MARY E
Address: 1580 SW HARBOUR ISLES CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: TREA ( ) Delete
Name: HILL, MARY E
Address: 1580 SW HARBOUR ISLES CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: MRS. ( ) Delete
Name: GLAZEBROOK, SANDRA
Address: 1248 ANGUS MORRISON ROAD
City-St-Zip: ALLIGATOR POINT, FL 32346 US

Title: MR. ( ) Delete
Name: HYLICK, JACK
Address: 2050 OLEANDER BOULEVARD APT 11-105
City-St-Zip: FORT PIERCE, FL 34950 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:

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 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: SHERYL P. REDDISH PRES 04/27/2008
Electronic Signature of Signing Officer or Director Date