


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90174 015 ***150.00

DOCUMENT # P03000124385	
1. Entity Name POOLS BY PHOENIX, INC.	

Principal Place of Business 5010 E. FAIRFAX DR LAKELAND, FL 33813	Mailing Address 5010 E. FAIRFAX DR LAKELAND, FL 33813
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40003407



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03312006 Chg-P CR2E034 (11/05)

4. FEI Number 59-3438704		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LECOURT LOCOVERT, DORIS E 5010 E. FAIRFAX DR LAKELAND, FL 33813		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Doris E. Lecourt* DATE 4/24/06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LECOURT, DORIS E 5010 E. FAIRFAX DR LAKELAND, FL 33813 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LECOURT, MICHAEL F 5010 E. FAIRFAX DR LAKELAND, FL 33813 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S THORPE, JOHN H 6325 OAKVIEW LN S LAKELAND, FL 33811 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Doris E. Lecourt* DATE 4/24/06 863-647-3385

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



ATTACHMENT
Division of Corporations

40069484

2006 Annual Report

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual
report form.

This information cannot be changed on the report.	
Document Number	P03000124385
Business Entity Name	POOLS BY PHOENIX, INC.
Original File Date	10/27/2003

FEI Number 59-3438704
Principal Address 5010 E. FAIRFAX DR
LAKELAND, FL 33813
Mailing Address 5010 E. FAIRFAX DR
LAKELAND, FL 33813
Registered Agent DORIS E LECOURT
5010 E. FAIRFAX DR
LAKELAND, FL 33813 US

Officer/Director Name And Address

P
DORIS E LECOURT
5010 E. FAIRFAX DR
LAKELAND, FL 33813

VP
MICHAEL F LECOURT
5010 E. FAIRFAX DR
LAKELAND, FL 33813

S
JOHN H THORPE
6325 OAKVIEW LN S
LAKELAND, FL 33811

If all of the above
information is correct and
you do not wish to make any

If you need to make changes
to the above information,
please select: