2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000124999

Entity Name: BURNS POOL SERVICE, INC.

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

505 AVENUE A NW

SUITE 102 W COLONIAL DRIVE WINTER HAVEN, FL 33881 OCOEE, FL 34761

New Mailing Address: **Current Mailing Address:**

505 AVENUE A NW PO BOX 850

SUITE 102 WINDERMERE, FL 34786 WINTER HAVEN, FL 33881

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

GOVONI, HARDING & ASSOCIATES, INC. BURNS, JOSEPH MR 505 AVENUE A NW 15504 AMBERBEAM BLVD WINTER GARDEN, FL 34787

SUITE 102 WINTER HAVEN, FL 33881

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: JOSEPH BURNS 04/28/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title: BURNS, JOSEPH BURNS, JOSEPH Name: Name: 187 SINCLAIR ROAD CHINGFORD 15504 AMBERBEAM BLVD Address: Address: City-St-Zip: LONDON R4 8PS, U.K., 33881 City-St-Zip: WINTER GARDEN, FL 34787

() Delete Title: Title: (X) Change () Addition

Name: BURNS, JOSEPH Name: BURNS, JENNY

4 BEAMINSTER GARDENS LLFORD Address: 15504 AMBERBEAM BLVD Address: ESSEX IG6 2BN, U.K., 33881 WINTER GARDEN, FL 34787 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: JOSEPH BURNS MR 04/28/2004