2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000128933

Entity Name: BAY ISLAND POOLS & SPAS INC.

FILED Apr 30, 2004 Secretary of State

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

244 HANGING MOSS DR 5160 LOMA VISTA CIRCLE #202

OVIEDO, FL 32765 OVIEDO, FL 32765

Current Mailing Address: New Mailing Address:

244 HANGING MOSS DR 5160 LOMA VISTA CIRCLE #202

OVIEDO, FL 32765 OVIEDO, FL 32765

FEI Number: 16-1688194 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:

HYDE, GREGORY S
244 HANGING MOSS DR

HYDE, GREGORY S
5160 LOMA VISTA CIRCLE #202

OVIEDO, FL 32765 OVIEDO, FL 32765

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: GREGORY S HYDE 04/30/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: HYDE, GREGORY S Name: HYDE, GREGORY S
Address: 244 HANGING MOSS DR Address: 5160 LOMA VISTA CIRLE #202

City-St-Zip: OVIEDO, FL 32765 City-St-Zip: OVIEDO, FL 32765

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: GREGORY S HYDE DP 04/30/2004