

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000139432

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: COMPLETE POOL BUILDERS, INC.

## Current Principal Place of Business:

5090 ST. AMBROSE CHURCH ROAD  
ELKTON, FL 32033 US

## New Principal Place of Business:

105 MARIES WAY  
ST. AUGUSTINE, FL 32086 US

## Current Mailing Address:

5090 ST. AMBROSE CHURCH ROAD  
ELKTON, FL 32033 US

## New Mailing Address:

4255 US HWY 1 SOUTH  
STE 18-222  
ST. AUGUSTINE, FL 32086 US

FEI Number: 55-0852921

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EINHEUSER, LAWRENCE B  
5090 ST. AMBROSE CHURCH ROAD  
ELKTON, FL 32033 US

## Name and Address of New Registered Agent:

EINHEUSER, LAWRENCE B  
4255 US HWY 1 SOUTH  
SUITE 18-222  
ST. AUGUSTINE, FL 32086 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:

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: EINHEUSER, LAWRENCE B PRES  
Address: 5090 ST. AMBROSE CHURCH ROAD  
City-St-Zip: ELKTON, FL 32033 US

Title: VP ( ) Delete  
Name: EINHEUSER, SHARON A VP  
Address: 5090 ST. AMBROSE CHURCH ROAD  
City-St-Zip: ELKTON, FL 32033 U

Title: SEC ( ) Delete  
Name: EINHEUSER, LAWRENCE B SEC  
Address: 5090 ST. AMBROSE CHURCH ROAD  
City-St-Zip: ELKTON, FL 32033 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: EINHEUSER, LAWRENCE B PRES  
Address: 4255 US HWY 1 SOUTH, SUITE 18-222  
City-St-Zip: ST. AUGUSTINE, FL 32086 US

Title: VP (X) Change ( ) Addition  
Name: EINHEUSER, SHARON A VP  
Address: 4255 US HWY 1 SOUTH, SUITE 18-222  
City-St-Zip: ST. AUGUSTINE, FL 32086 US

Title: SEC (X) Change ( ) Addition  
Name: EINHEUSER, LAWRENCE B SEC  
Address: 4255 US HWY 1 SOUTH, SUITE 18-222  
City-St-Zip: ST. AUGUSTINE, FL 32086 US

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: SHARON EINHEUSER

VP

04/29/2009

Electronic Signature of Signing Officer or Director

Date