

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000009800

**FILED**  
**Sep 05, 2012**  
**Secretary of State**

**Entity Name:** ALLINSON POOL CARE AND REPAIR, INC.

**Current Principal Place of Business:**

2753 NW 122 AVE  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

2753 NW 122 AVE  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

**FEI Number:** 20-0610764

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCGONIGLE, JACQUELINE  
6221 BANYAN TERR  
PLANTATION, FL 33317 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

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** ALLINSON, CHARLES  
**Address:** 2753 NW 122 AVE  
**City-St-Zip:** CORAL SPRINGS, FL 33065

I hereby 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 all other like empowered.

**SIGNATURE:** CHARLES ALLINSON

D

09/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date