2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000050588

Entity Name: SIR WILLIAMS POOLS, INC.

FILED Aug 14, 2009 Secretary of State

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

2679 MARATHON LANE FT. LAUDERDALE, FL 33312

Current Mailing Address: New Mailing Address:

2679 MARATHON LANE FT. LAUDERDALE, FL 33312

FEI Number: 20-0965505 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:

NOTT, WILLIAM NOTT, CYNTHIA

2679 MARATHON LANE 2679 MARATHON LANE

FT. LAUDERDALE, FL 33312 US FT . LAUDERDALE, FL 33312 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: CYNTHIA NOTT 08/14/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 NOTT, WILLIAM
 Name:
 NOTT, CYNTHIA

 Address:
 2679 MARATHON LANE
 Address:
 2679 MARATHON LANE

 City-St-Zip:
 FT. LAUDERDALE, FL 33312
 City-St-Zip:
 FT. LAUDERDALE, FL 33312

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

 Name:
 NOTT, CYNTHIA
 Name:
 NOTT, NICOLE

 Address:
 2679 MARATHON LANE
 Address:
 2679 MARATHON LANE

 City-St-Zip:
 FT. LAUDERDALE, FL 33312
 City-St-Zip:
 FT. LAUDERDALE, FL 33312

Title: D () Delete Title: () Change () Addition

 Name:
 VARGS, FRANCISCO
 Name:

 Address:
 3904 SW 14 STREET
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33312
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 MCKINNES, RÓBERT
 Name:

 Address:
 2101 SW 36 AVENUE
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33312
 City-St-Zip:

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

 Name:
 NOTT, NICOLE
 Name:

 Address:
 2679 MARATHON LANE
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33312
 City-St-Zip:

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: CYNTHIA NOTT D 08/14/2009