


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000078193

1. Entity Name
LEONARD DOYLE POOL & SPA SERVICE, INC.



Principal Place of Business
**3043 SW 24TH AVE
 CAPE CORAL, FL 33914**

Mailing Address
**3043 SW 24TH AVE
 CAPE CORAL, FL 33914**

DO NOT WRITE IN THIS SPACE



01312006 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1110721

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**DOYLE, LEONARD
 3043 SW 24TH AVE
 CAPE CORAL, FL 33914**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Leonard Doyle* (NOTE: Registered Agent signature required when rechartering)

DATE: *April 07, 06*

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DOYLE, LEONARD 3043 SW 24TH AVE CAPE CORAL, FL 33914
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 04/21/06-00024-014 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Leonard Doyle*

DATE: *April 4, 06*

Daytime Phone #