

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2007 8:00 am
Secretary of State

02-23-2007 90034 022 ***150.00

DOCUMENT # P04000098091

1. Entity Name
GOOD TIME POOL, INC.



Principal Place of Business
1216 WEST LAKES DRIVE
DEERFIELD BCH, FL 33442

Mailing Address
1216 WEST LAKES DRIVE
DEERFIELD BCH, FL 33442

2. Principal Place of Business - No P.O. Box #

6888 JULIA GARDENS DRIVE
Suite, Apt. #, etc.

3. Mailing Address

6888 JULIA GARDENS DRIVE
Suite, Apt. #, etc.

City & State

COCONUT CREEK, FL

City & State

COCONUT CREEK, FL

Zip

33073

Country

Zip

33073

Country

02172007

Chg-P

CR2E034 (12/06)

4. FEI Number

20-1304216

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NEVES, LEONARDO
1216 WEST LAKES DRIVE
DEERFIELD BEACH, FL 33442

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME NEVES, LEONARDO
STREET ADDRESS 1216 WEST LAKES DRIVE
CITY-ST-ZIP DEERFIELD BCH, FL 33442

TITLE V ☐ Delete
NAME NEVES, ANDREIA K
STREET ADDRESS 1216 WEST LAKES DRIVE
CITY-ST-ZIP DEERFIELD BCH, FL 33442

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6888 JULIA GARDENS DRIVE
CITY-ST-ZIP COCONUT CREEK, FL 33073

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6888 JULIA GARDENS DRIVE
CITY-ST-ZIP COCONUT CREEK, FL 33073

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Leonardo Neves LEONARDO NEVES, P

02-20-07

Date

Daytime Phone #