

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000104276

FILED
Jan 20, 2009
Secretary of State

Entity Name: POSH POOLS OF FLORIDA, INC.

Current Principal Place of Business:

18548 US HWY 19 N
CLEARWATER, FL 33764

New Principal Place of Business:

31515 US HWY 19
PALM HARBOR, FL 34684

Current Mailing Address:

18548 US HWY 19 N
CLEARWATER, FL 33764

New Mailing Address:

31515 US HWY 19
PALM HARBOR, FL 34684

FEI Number: 75-3160780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICHOLS, CODY D
18548 US HWY 19 N
CLEARWATER, FL FL US

Name and Address of New Registered Agent:

NICHOLS, CODY D
31515 US HWY 19
PALM HARBOR, FL 34684 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: CODY NICHOLS

01/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NICHOLS, CODY D III
Address: 18548 US HWY 19 N
City-St-Zip: CLEARWATER, FL 33764 US

Title: VP () Delete
Name: BUSCEMA, STEVEN
Address: 18548 US HWY 19 N
City-St-Zip: CLEARWATER, FL 33764 US

Title: S (X) Delete
Name: NICHOLS, TOSHA N
Address: 18548 US HWY 19
City-St-Zip: CLEARWATER, FL 33764 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NICHOLS, CODY D III
Address: 31515 US HWY 19
City-St-Zip: PALM HARBOR, FL 34684 US

Title: VP (X) Change () Addition
Name: NICHOLS, TOSHA
Address: 31515 US HWY 19
City-St-Zip: PALM HARBOR, FL 34684 US

Title: () Change () Addition
Name:
Address:
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: CODY NICHOLS

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date