

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Sep 05, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P04000106856

1. Entity Name  
ROB DONAHOE POOL SERVICE, INC.



Principal Place of Business  
2523 MONTEREY STREET  
SARASOTA, FL 34231

Mailing Address  
2523 MONTEREY STREET  
SARASOTA, FL 34231



07062006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-1396637

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

SHELLE K. OTTO P.A.  
2010 PINE TERRACE  
SARASOTA, FL 34231

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9-1-06

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE P  
NAME DONAHOE, ROB  
STREET ADDRESS 2523 MONTEREY STREET  
CITY-ST-ZIP SARASOTA, FL 34231

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

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09/05/06-80005-006 150.00

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:

*Rob Donahoe*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-1-06 (941) 9239115

Date

Daytime Phone #