

PO4000109512

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

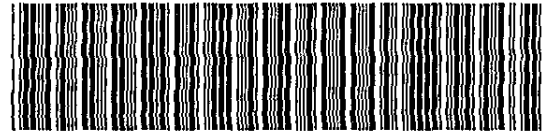
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900051353569

04/26/05--01052--003 **35.00

FILED
05 APR 26 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
09

Smith MAY 04 2005

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: H2O Pools, Inc.
(Name of corporation)

DOCUMENT NUMBER: P04000109512

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael R. Povia Jr. - President
(Name of contact person)

H2O Pools, Inc.
(Firm/Company)

25135 NE 132nd Place
(Address)

Salt Springs, FL 32134-9314
(City/state and zip code)

For further information concerning this matter, please call:

Michael R. Povia Jr. at (352) 342 - 5669
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- Michael R. Povia Jr.
4603 SW 7th Avenue
Cape Coral, FL 33914

- Michael R. Povia Jr.
25135 NE 132nd Place
(P.O. Box NOT acceptable)
Salt Springs, FL 32134-9314

(Typed or Printed Name)

MAIL TO: MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314