## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000109675

Entity Name: OUTBACK POOLS AND WATERFALLS, INC.

FILED Oct 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

931 N.W. SAVANNAH CIRCLE LAKE CITY, FL 32055

Current Mailing Address: New Mailing Address:

4780 BONANZA ROAD 931 N.W. SAVANNAH CIRCLE LAKE WORTH, FL 33467 LAKE CITY, FL 32055

FEI Number: 20-1874706 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MILNER, ROBERT A
4780 BONENZA RD
LAKE WORTH, FL 33467 US

MILNER, ROBERT A
931 NW SAVANNAH CIR
LAKE CITY, FL 32055 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: ROBERT A. MILNER 10/18/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition MILNER, ROBERT A MILNER, ROBERT A Name: Name: 4780 BONENZA RD 931 NW SAVANNAH CIR Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE CITY, FL 32055

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 MILNER, CLAUDIA
 Name:
 MILNER, CLAUDIA

 Address:
 4780 BONENZA RD
 Address:
 931 NW SAVANNAH CIR

 City-St-Zip:
 LAKE CITY, FL 32055
 City-St-Zip:
 LAKE CITY, FL 32055

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: CLAUDIA MILNER STD 10/18/2009