

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P04000112954

1. Entity Name  
W.G. POOL SERVICE, INC.



Principal Place of Business  
2914 SW 11TH PLACE  
DEERFIELD BEACH, FL 33442

Mailing Address  
2914 SW 11TH PLACE  
DEERFIELD BEACH, FL 33442



**DO NOT WRITE IN THIS SPACE**

02282006 No Chg-P CR2E034 (11/05)

4. FEI Number  
20-1466949

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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

GEAQUINTO, WILSON  
2914 SW 11TH PLACE  
DEERFIELD BEACH, FL 33442

**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 how it appears

(NOTE: Registered Agent signature required when reinstating)

4/24/2006  
DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

U000000557778  
05/17/06-80064-012 150.00

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
GEOQUINTO, WILSON  
STREET ADDRESS  
2914 SW 11TH PLACE  
CITY-ST-ZIP  
DEERFIELD BEACH, FL 33442

TITLE  
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CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/2006  
Date

Daytime Phone #