

## **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000121001

**Entity Name:** FANTASTIC POOL SERVICE, INC.

**FILED**  
**Aug 17, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

605 SE 56TH AVE.  
OCALA, FL 34471

**New Principal Place of Business:**

605 SE 56TH AVE.  
OCALA, FL 34480

**Current Mailing Address:**

605 SE 56TH AVE.  
OCALA, FL 34471

**New Mailing Address:**

605 SE 56TH AVE.  
OCALA, FL 34480

**FEI Number:** 43-2077920

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SUMMERLIN, CRAIG  
605 SE 56TH AVE.  
OCALA, FL 34471 US

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

LONG, RICHARD E III  
605 SE 56TH AVE.  
OCALA, FL 34480 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: RICHARD E. LONG, III

08/17/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PVTs ( ) Delete  
Name: SUMMERLIN, CRAIG  
Address: 605 SE 56TH AVE.  
City-St-Zip: OCALA, FL 34471

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PVTs (X) Change ( ) Addition  
Name: LONG, RICHARD E III  
Address: 605 SE 56TH AVE.  
City-St-Zip: OCALA, FL 34480

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: RICHARD E. LONG, III

PVTs

08/17/2007

Electronic Signature of Signing Officer or Director

Date