

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90280 015 ***150.00

DOCUMENT # P04000134442

1. Entity Name
SUMMIT POOL AND SPA, INC



Principal Place of Business
7975 W. GROVER CLEVELAND BLVD.
HOMOSASSA, FL 34446

Mailing Address
7975 W. GROVER CLEVELAND BLVD.
HOMOSASSA, FL 34446

0001286



2. Principal Place of Business
3952 S. Suncoast Blvd.
Suite, Apt. #, etc.
Springs Plaza

3. Mailing Address
3952 S. Suncoast Blvd.
Suite, Apt. #, etc.
Springs Plaza

01312006 Chg-P CR2E034 (11/05)

City & State
Homosassa, FL

City & State
Homosassa, FL

4. FEI Number
20-1671909

Applied For
Not Applicable

Zip
34448

Country
Citrus

Zip
34448

Country
Citrus

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

6. Name and Address of Current Registered Agent

WHARTON, JILL A
1391 W PEARSON STREET
HERNANDO, FL 34442

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
WHARTON, JILL A
1391 W PEARSON STREET
HERNANDO, FL 34442 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
WHARTON, BROOKE M
1391 W PEARSON STREET
HERNANDO, FL 34442 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
3952 S. SUNCOAST BLVD
HOMOSASSA FL 34448

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
3952 S. SUNCOAST BLVD
HOMOSASSA FL 34448

TITLE
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☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: *Jill A. Wharton Pres Jill A. Wharton*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/06
Date

352 628-6666
Daytime Phone #