

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000146007

FILED
Sep 02, 2005
Secretary of State

Entity Name: LITTLE LAGOON POOLS & SPA, INC.

Current Principal Place of Business:

15734 ACORN CIRCLE
TAVARES, FL 32778

New Principal Place of Business:

Current Mailing Address:

15734 ACORN CIRCLE
TAVARES, FL 32778

New Mailing Address:

FEI Number: 20-1759031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLSON, TERRY E
545 N. UMATILLA BLVD.
UMATILLA, FL 32784 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BONVISUTO, RICHARD
Address: 15734 ACORN CIRCLE
City-St-Zip: TAVARES, FL 32778

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD () Change (X) Addition
Name: BONVISUTO, CHERYL A
Address: 15734 ACORN CIRCLE
City-St-Zip: TAVARES, FL 32778

Title: OD () Change (X) Addition
Name: WILSON, TREVOR A
Address: 15734 ACORN CIRCLE
City-St-Zip: TAVARES, FL 32778

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHERYL BONVISUTO

VD

09/02/2005

Electronic Signature of Signing Officer or Director

Date