2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 14, 2009
Secretary of State

DOCUMENT# P04000147102

Entity Name: EVERGLADES POOL COMPANY, INC.

Current Principal Place of Business:

208 SE TODD AVENUE
PORT SAINT LUCIE, FL 34983 US

New Principal Place of Business:

4856 SW BIMINI CIRCLE S.
PALM CITY, FL 34990 US

Current Mailing Address:

P O BOX 9556
PORT SAINT LUCIE, FL 34985 US

New Mailing Address:

FEI Number: 20-1811425 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KENT, SHARON I
208 SE TODD AVENUE
PORT ST. LUCIE, FL 34983 US

Name and Address of New Registered Agent:

KENT, SHARON I
4856 SW BIMINI CIRCLE S.
PALM CITY, FL 34990 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: 12/14/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: KENT, EDWIN D
Address: 208 SE TODD AVENUE
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

Title: VP,T ( ) Delete
Name: KENT, SHARON
Address: 208 SE TODD AVENUE
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

Title: S (X) Delete
Name: KENT, BETTY D
Address: 208 SE TODD AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS (X) Change ( ) Addition
Name: KENT, SHARON I
Address: 4856 SW BIMINI CIRCLE S.
City-St-Zip: PALM CITY, FL 34990 US

Title: VP (X) Change ( ) Addition
Name: KENT, ERIK
Address: 4856 SW BIMINI CIRCLE S.
City-St-Zip: PALM CITY, FL 34990 US

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

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: SHARON I KENT D 12/14/2009
Electronic Signature of Signing Officer or Director — Date