

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000017781

FILED
Jan 31, 2008
Secretary of State

Entity Name: RHODEN POOL SUPPLIES, INC.

Current Principal Place of Business:

1615 COUNTY ROAD 220
UNIT 120
ORANGE PARK, FL 32003 US

Current Mailing Address:

1615 COUNTY ROAD 220
UNIT 120
ORANGE PARK, FL 32003 US

New Principal Place of Business:

1615 COUNTY ROAD 220
UNIT 220
ORANGE PARK, FL 32003 US

New Mailing Address:

1615 COUNTY ROAD 220
UNIT 220
ORANGE PARK, FL 32003 US

FEI Number: 20-2995798

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHODEN SR., MARCUS W
6363 WEST RIVER CIRCLE
MACCLENLY, FL 32063 US

Name and Address of New Registered Agent:

RHODEN, MARCUS W JR
1615 COUNTY ROAD 220
UNIT 220
ORANGE PARK, FL 32003 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: MARCUS W. RHODEN, JR.

01/31/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RHODEN, SR, MARCUS W
Address: 6363 WEST RIVER CIRCLE
City-St-Zip: MACCLENLY, FL 32063

Title: D () Delete
Name: RHODEN, JR, MARCUS W
Address: 6363 WEST RIVER CIRCLE
City-St-Zip: MACCLENLY, FL 32063

Title: D () Delete
Name: RHODEN, RITA G
Address: 6363 WEST RIVER CIRCLE
City-St-Zip: MACCLENLY, FL 32063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: RHODEN, MARCUS W SR
Address: 6363 WEST RIVER CIRCLE
City-St-Zip: MACCLENLY, FL 32063

Title: D (X) Change () Addition
Name: RHODEN, MARCUS W JR
Address: 6363 WEST RIVER CIRCLE
City-St-Zip: MACCLENLY, FL 32063

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: MARCUS W. RHODEN, JR.

D

01/31/2008

Electronic Signature of Signing Officer or Director

Date