

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000067938

Entity Name: LES'S POOL SERVICE, INC.

FILED
Sep 17, 2009
Secretary of State

Current Principal Place of Business:

116 CYPRESS POINT CIRCLE
EAST PALATKA, FL 32131 US

New Principal Place of Business:

Current Mailing Address:

1093 A1A BEACH BOULEVARD
PMB 281
ST. AUGUSTINE, FL 32080 US

New Mailing Address:

1093 A1A BEACH BOULEVARD
PMB #281
ST. AUGUSTINE, FL 32080 US

FEI Number: 26-2016485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SEITZ, LESLIE E
116 CYPRESS POINT CIRCLE
EAST PALATKA, FL 32131 US

Name and Address of New Registered Agent:

SEITZ, SUZANNE M
116 CYPRESS POINT CIRCLE
EAST PALATKA, FL 32131 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: SUZANNE M. SEITZ

09/17/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SEITZ, LESLIE E
Address: 116 CYPRESS POINT CIRCLE
City-St-Zip: EAST PALATKA, FL 32131 US

Title: STD () Delete
Name: SEITZ, SUZANNE
Address: 116 CYPRESS POINT CIRCLE
City-St-Zip: EAST PALATKA, FL 32131 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SEITZ, SUZANNE M
Address: 116 CYPRESS POINT CIRCLE
City-St-Zip: EAST PALATKA, FL 32131 US

Title: STD (X) Change () Addition
Name: SEITZ, LESLIE E IV
Address: 116 CYPRESS POINT CIRCLE
City-St-Zip: EAST PALATKA, FL 32131 US

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: SUZANNE M. SEITZ

PD

09/17/2009

Electronic Signature of Signing Officer or Director

Date