## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000093727

6057 POMPANO ST

FT MYERS, FL 33919

Address:

City-St-Zip:

Entity Name: QUALITY CUSTOM POOLS INC

FILED Mar 23, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4519 SE 16TH PLACE 6057 POMPANO STREET FORT MYERS, FL 33919 109 CAPE CORAL, FL 33904 **New Mailing Address: Current Mailing Address:** 4519 SE 16TH PLACE 6057 POMPANO STREET FORT MYERS, FL 33919 CAPE CORAL, FL 33904 FEI Number: 20-3097609 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARANDA, JOSE 6057 POMPANO STREET FT MYERS, FL 33919 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PΩ () Delete Title: () Change () Addition ARANDA, JOSE Name: Name: 6057 POMPANO ST Address: Address: City-St-Zip: FT MYERS, FL 33919 City-St-Zip: ( ) Delete Title: VP,D Title: () Change () Addition Name: GONZALEZ, ABRAHAM 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: ABRAHAM GONZALEZ VP 03/23/2009