2007 FOR PROFIT CORPORATION

FILED May 02, 2007 08:00 A Secretary of State

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MENT # P0500011286	31			;	Šecrétary of St	
OSH ROAD	4415 MCINTOSH ROAD					
			03292007 4. FEI Numb 20-330	03292007 No Chg-P CR2E034 (11/05) 4. FEI Number		
SONNEN, RUSSEL L JR. 4415 MCINTOSH ROAD SARASOTA, FL 34233			DO NOT WRITE IN THIS SPACE d office or registered agent, or both, in the State of Florida. I am familiar with, and accept			
		ncing _	\$5.00 May Be Added to Fees		DATE:	
OFFICERS AND DIRI P SONNEN, RUSSEL L JR. 4415 MCINTOSH ROAD SARASOTA, FL 34233 VP SONNEN, AMANDA 4415 MCINTOSH ROAD SARASOTA, FL 34233	CTORS			•	· .	
	MENT # P0500011286 POOLS, INC. of Business DSH ROAD L 34233 ON NOT WRITE I 6. Name and Address of Current Region and Address of Road A, FL 34233 named entity submits this statement for the ons of registered agent. Signature, typed or printed name of registered agent and to the ons of registered agent. Signature, typed or printed name of registered agent and to the ons of registered agent. Signature, typed or printed name of registered agent and to the ons of registered agent. Signature, typed or printed name of registered agent and to the ons of registered agent. Signature, typed or printed name of registered agent and to the ons of registered agent. Signature, typed or printed name of registered agent and to the ons of registered agent. Signature, typed or printed name of registered agent and to the ons of registered agent. Signature, typed or printed name of registered agent and to the ons of registered agent. Signature, typed or printed name of registered agent and to the ons of registered agent and to the ons of registered agent. Signature, typed or printed name of registered agent and to the ons of registered agent	MENT # P05000112861 POOLS, INC. Of Business DSH ROAD L 34233 Mailing Address A415 MCINTOSH ROAD SARASOTA, FL 34233 PO NOT WRITE IN THIS SPA 6. Name and Address of Current Registered Agent RUSSEL L JR. ITOSH ROAD A, FL 34233 Inamed entity submits this statement for the purpose of changing its register ons of registered agent. Signature, typed or printed name of registered agent and attle of applicable E NOW!!! FEE IS \$150.00 Trust Fund Contribution. OFFICERS AND DIRECTORS P SONNEN, RUSSEL L JR. 4415 MCINTOSH ROAD SARASOTA, FL 34233 VP SONNEN, AMANDA 4415 MCINTOSH ROAD	MENT # P05000112861 POOLS, INC. Of Business DSH ROAD A415 MCINTOSH ROAD SARASOTA, FL 34233 CONOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent RUSSEL L JR. BTOSH ROAD A, FL 34233 Inamed entity submits this statement for the purpose of changing its registered office or regions of registered agent. Signature, typed or protect name of regalered signat and this of applicable E NOWIII FEE IS \$150.00 BY 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS P SONNEN, RUSSEL L JR. 4415 MCINTOSH ROAD SARASOTA, FL 34233 VP SONNEN, AMANDA 4415 MCINTOSH ROAD SONNEN, AMANDA 4415 MCINTOSH ROAD	MENT # P05000112861 POOLS, INC. Of Business Mailing Address 4415 MCINTOSH ROAD SARASOTA, FL 34233 ONOT WRITE IN THIS SPACE O3292007 4. FEI Numb 20-330 5. Certificate 6. Name and Address of Current Registered Agent RUSSEL L JR. ITOSH ROAD A, FL 34233 IN DO IN Signature, typed or printed name of registered agent and tell of applicable E NOWILL FEE IS \$150.00 E NOWILL FEE IS \$150.00 Trust Fund Contribution. OFFICERS AND DIRECTORS P SONNEN, RUSSEL L JR. 4415 MCINTOSH ROAD SARASOTA, FL 34233 VP SONNEN, AMANDA 4415 MCINTOSH ROAD SARASOTA, FL 34233 VP SONNEN, AMANDA 4415 MCINTOSH ROAD SARASOTA, FL 34233 VP SONNEN, AMANDA 4415 MCINTOSH ROAD SARASOTA, FL 34233 DO DO DO DO DO DO DO DO DO	MENT # P05000112861 POOLS, INC. In Business Mailing Address 28H ROAD 4415 MCINTOSH ROAD SARASOTA, FL 34233 ONNEN, RUSSEL L JR. Topiculus lyaded or britted name of requireded agent and titled approaches Poon NOT WRITE IN THIS SPACE Mailing Address 4415 MCINTOSH ROAD A, FL 34233 DO NOT W IN THIS SP Poon Not well a statement for the purpose of changing its registered office or registered agent, or both, in the State of Ficense of registered agent. Pool Not well a statement for the purpose of changing its registered office or registered agent, or both, in the State of Ficense of registered agent. By business Mailing Address ONE Change of Current Registered Agent IN THIS SP IN THIS SP Poon Not well a statement for the purpose of changing its registered office or registered agent, or both, in the State of Ficense Agent sprature required when renationally and the flaboration of th	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kur

NAME

STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-29-07

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