

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000117454

FILED
Jun 14, 2009
Secretary of State

Entity Name: FLAWLESS POOL SCREENING, INC.

Current Principal Place of Business:

11867 STURBRIDGE LANE
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

11867 STURBRIDGE LANE
WELLINGTON, FL 33414

New Mailing Address:

2381 COUNTRY GOLF DRIVE
WELLINGTON, FL 33414

FEI Number: 20-3757175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOPSON, HUBERT I SR
1370 WOODDALE TERRACE
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

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

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: PT () Delete
Name: HOPSON, HUBERT I JR.
Address: 11867 STURBRIDGE LANE
City-St-Zip: WELLINGTON, FL 33414

Title: V () Delete
Name: HOPSON, HUBERT I SR.
Address: 1370 WOODDALE TERRACE
City-St-Zip: WELLINGTON, FL 33414

Title: VS () Delete
Name: HOPSON, CHRISTINA
Address: 11867 STURBRIDGE LANE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: HUBERT HOPSON

MR

06/14/2009

Electronic Signature of Signing Officer or Director

Date