
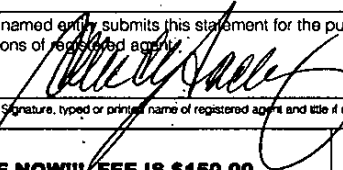
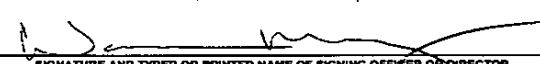


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 07, 2006 8:00 am
Secretary of State

08-07-2006 90045 027 ***150.00

DOCUMENT # P05000125799 1. Entity Name SUBTROPIC POOLS, INC.					
Principal Place of Business 11891 US HIGHWAY ONE STE 100 NORTH PALM BEACH, FL 33408			Mailing Address 11891 US HIGHWAY ONE STE 100 NORTH PALM BEACH, FL 33408		
2. Principal Place of Business 1509 Villa Juno Dr. N. Suite, Apt. #, etc.			3. Mailing Address 1509 Villa Juno Dr. N. Suite, Apt. #, etc.		
City & State Juno Beach, FL Zip 33408			City & State Juno Beach, FL Zip 33408		
Country US			Country US		
4. FEI Number 20-3460324			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent HACKNEY, ROBERT C 11891 US HIGHWAY ONE 100 NORTH PALM BEACH, FL 33408			7. Name and Address of New Registered Agent Name Robert C. Hackney, Esq. Street Address (P.O. Box Number is Not Acceptable) Moyle, Flanigan, Katz, et al 625 N. Flagler Dr. - 9th Floor City West palm beach FL Zip Code 33401		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 			Robert C. Hackney, Esq. (NOTE: Registered Agent signature required when reinstating)		
DATE 8/3/06			DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Warren Moseley, P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1509 Villa Juno Dr. N. Juno Beach, FL 33408				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
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: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date 7-15-06 (561) 723-1975 Daytime Phone #					

50024604



04262006 Chg-P CR2E034 (11/05)

The Law Offices of
**MOYLE
FLANIGAN
KATZ
RAYMOND
WHITE
& KRASKER
P.A.**

ATTACHMENT
50024604

OFFICE ADDRESS:

**625 NORTH FLAGLER DRIVE, 9TH FLOOR
WEST PALM BEACH, FLORIDA 33401-4025**

POST OFFICE DELIVERY:

**POST OFFICE BOX 3888
WEST PALM BEACH, FLORIDA 33402-3888**

TELEPHONE (561) 659-7500

FACSIMILE (561) 659-1789

OTHER OFFICES:

TALLAHASSEE
WELLINGTON

PETER L. BRETON
DANIEL DOORAKIAN
JOHN R. EUBANKS, JR.
JOHN F. FLANIGAN
JEFFREY M. GOODZ
ROBERT C. HACKNEY
WILLIAM H. HOLLIMON
MARTIN V. KATZ
JESSICA L. KOCH
PAUL A. KRASKER
FRANCIS X. J. LYNCH
CORI N. MARSHALL
JON C. MOYLE
JON C. MOYLE, JR.
MARSHALL J. OSOFSKY
MARK E. RAYMOND
ANDREA M. SILVA
MARTA M. SUAREZ-MURIAS
WILTON L. WHITE

OF COUNSEL:

THOMAS A. HICKEY
VICKI GORDON KAUFMAN
PAUL J. NICOLETTI
RONALD WITKOWSKI

WRITER'S DIRECT LINE:

(561) 822-0346

August 4, 2006

Department of State
Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

RE: Annual Report
Subtropic Pools, Inc.- P05000125799

To Whom It May Concern:

Please accept the Annual Report on the above referenced company without the late fee penalty. The client had moved and did not get my letter of March 25, 2006 in reference to the annual report. In turn, our office moved and in the shuffle I did not get the chance to attempt additional contact with the client. We have now made contact and have the form prepared with both of our addressed corrected.

Thank you and please contact me if there is any additional information needed on this file.

Sincerely



Alicia Page
Legal Assistant