2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000132293

Entity Name: ELEGANT POOL DESIGN AND CONSTRUCTION INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1709 TURNSTONE WAY CLERMONT, FL 34711							
Current Mailing Address:				New Mailing Address:			
PO BOX 121742 CLERMONT, FL 347121742							
FEI Number:	36-4580076	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
LYNCH, HUGH 200 COUNTYLINE COURT SUITE 2 OAKLAND, FL 34787 US				LYNCH, HUGH 1709 TURNSTONE WAY CLERMONT, FL FL 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: HUGH LYNCH				04/21/2009			
		Signature of Registered Agent	t			Date	
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () [LYNCH, HUGH PO BOX 121742 CLERMONT, FL			Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	VP ()[ROBERTS, MARG PO BOX 121742 CLERMONT, FL			Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	SEC ()[LYNCH, HUGH PO BOX 121742 CLERMONT, FL			Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	TREA ()[ROBERTS, MARG PO BOX 121742 CLERMONT, FL			Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	DIR ()[LYNCH, HUGH PO BOX 121742 CLERMONT, FL			Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	DIR ()[ROBERTS, MAR PO BOX 121742 CLERMONT, FL	2		Title: Name: Address: City-St-Zip:	ROBERTS, M. PO BOX 1217		

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: HUGH LYNCH PRES 04/21/2009