2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000028736

Entity Name: EAST COAST POOLS AND SPAS INC.

FILED Mar 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

182 E WOODHAVEN CIR
ORMOND BEACH, FL 32174

1424 RIDGEWOOD AVE
UNIT 5

HOLLY HILL, FL 32117

Current Mailing Address: New Mailing Address:

182 E WOODHAVEN CIR
ORMOND BEACH, FL 32174

1424 RIDGEWOOD AVE
UNIT 5

HOLLY HILL, FL 32117

HOLLT HILL, FL 3211

FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GILBERT, RACHAEL M

182 E. WOODHAVEN CIR

1424 RIDGEWOOD AVE

ORMOND BEACH, FL 32174 US UNIT 5

FEI Number Applied For ()

HOLLY HILL, FL 32117 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: RACHAEL GILBERT 03/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

FEI Number: 20-4396239

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: GILBERT, JAMES T IV
Address: PO BOX 732037

Name: GILBERT, JAMES T IV
Address: 1424 RIDGEWOOD AVE UNIT 5

City-St-Zip: ORMOND BEACH, FL 32173 City-St-Zip: HOLLY HILL, FL 32117

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 GILBERT, RACHAEL M
 Name:
 GILBERT, RACHAEL M

 Address:
 PO BOX 732037
 Address:
 1424 RIDGEWOOD AVE UNIT 5

 City-St-Zip:
 ORMOND BEACH, FL 32173
 City-St-Zip:
 HOLLY HILL, FL 32117

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: RACHAEL GILBERT VP 03/30/2009