


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90093 003 ***150.00

DOCUMENT # P06000035806		
1. Entity Name BANTINGS POOL SERVICE, INC.		

Principal Place of Business C/O COMPUKEEPER INC. 2298 NW 2ND AVE STE 20 BOCA RATON, FL 33433-1	Mailing Address C/O COMPUKEEPER INC. 2298 NW 2ND AVE STE 20 BOCA RATON, FL 33433-1
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2. Principal Place of Business - No P.O. Box # 1447 SW 25th PLACE		3. Mailing Address	
Suite, Apt. #, etc. #C		Suite, Apt. #, etc.	
City & State BOYNTON BEACH, FL		City & State	
Zip 33426	Country	Zip	Country

40053040




04052007 Chg-P CR2E034 (12/06)

4. FEI Number 20-4438032	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 BANTING, JAMES C/O COMPUKEEPER INC. 2298 NW 2ND AVE STE 20 BOCA RATON, FL 33433-1		7. Name and Address of New Registered Agent Name JAMES BANTING Street Address (P.O. Box Number is Not Acceptable) 1447 SW 25th PLACE #C City BOYNTON BEACH FL Zip Code 33426	
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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  **JAMES BANTING, PR** (NOTE: Registered Agent signature required when reinstating) DATE **4/10/07**

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANTING, JAMES 1447 SW 25TH PLACE #C BOYNTON BCH, FL 33426 <input type="checkbox"/> Delete	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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:  **James Banting, PR** Date **4/10/07** Daytime Phone # **(561) 704 8774**