

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000036022

Entity Name: HEALTHY CHOICE POOLS, INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

20030 SEAGROVE  
ESTERO, FL 33928

## New Principal Place of Business:

20030 SEAGROVE  
UNIT 1501  
ESTERO, FL 33928

## Current Mailing Address:

20030 SEAGROVE  
ESTERO, FL 33928

## New Mailing Address:

20030 SEAGROVE  
UNIT 1501  
ESTERO, FL 33928

FEI Number: 20-4680324

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HARRINGTON, PATRICK  
20030 SEAGROVE  
ESTERO, FL 33928 US

## Name and Address of New Registered Agent:

HARRINGTON, PATRICK  
20030 SEAGROVE  
UNIT 1501  
ESTERO, FL 33928 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:

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LOUCAIDES, GEORGE  
Address: 5853 NORTH CROSSVIEW  
City-St-Zip: SEVEN HILLS, OH 44131

Title: VP ( ) Delete  
Name: HARRINGTON, PATRICK  
Address: 34435 LAUREL WAY  
City-St-Zip: AVON, OH 44011

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GEORGE LOUCAIDES

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date