2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000037498

Entity Name: SHORELINE POOLS INC.

FILED Apr 01, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2821 DUEBY ST SARASOTA, FL 32431

Current Mailing Address: New Mailing Address:

P.O. BOX 18301 SARASOTA, FL 32476

FEI Number: 20-4529413 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WILLIAMSON, DARIN 2821 DUEBY ST 2821 DUEBY ST SARASOTA, FL 32431 US SARASOTA, FL 32431 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: DARIN WILLIAMSON 04/01/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WILLIAMSON, DARIN D

 Name:
 WILLIAMSON, DARIN D

 Address:
 P.O. BOX 18301
 Address:
 P.O. BOX 18301

 City-St-Zip:
 SARASOTA, FL 32476
 City-St-Zip:
 SARASOTA, FL 32476

Title: T () Delete Title: () Change () Addition

 Name:
 FOUNTAIN, RYAN W
 Name:

 Address:
 P.O. BOX 18301
 Address:

 City-St-Zip:
 SARASOTA, FL 32476
 City-St-Zip:

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

 Name:
 Name:
 WILLIAMSON, RACHEL A

 Address:
 Address:
 2821 DUEBY ST.

 City-St-Zip:
 City-St-Zip:
 SARASOTA, FL 34231

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: RACHEL WILLIAMSON VP 04/01/2009