

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000145447

1. Entity Name

CLEARWATER POOL SERVICES OF SOUTH WALTON,
INC.



Principal Place of Business

47 CHRYSLER AVENUE
SANTA ROSA BEACH, FL 32459 US

Mailing Address

47 CHRYSLER AVENUE
SANTA ROSA BEACH, FL 32459 US

FILED
Sep 02, 2008 08:00 AM
Secretary of State



07282008 No Chg-P CR2E034 (11/05)

4. FEI Number

20-5914125

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CONGLETON, BRAD
50 UPTOWN GRAYTON CIRCLE
SUITE 15
SANTA ROSA BEACH, FL 32459

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees ☐

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
P	STEIN, MATTHEW	47 CHRYSLER AVENUE	SANTA ROSA BEACH, FL 32459

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**DO NOT WRITE
IN THIS SPACE**

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09/02/08-80001-016-150.00

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: MATTHEW STEIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/26/2008 850-231-4238
Date Daytime Phone #