2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000011461

Entity Name: NATIONWIDE POOLS OF W. PALM BCH, INC.

Electronic Signature of Registered Agent

FILED Feb 14, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
4463 WEST ROADS DRIVE WEST PALM BEACH, FL 33407	
Current Mailing Address:	New Mailing Address:
4463 WEST ROADS DRIVE WEST PALM BEACH, FL 33407	
FEI Number: 20-8458912 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:
STUART, KEITH 4463 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 US	STUART, KEITH L 1923 NW 40 CT POMPANO BCH., FL 33064 US
The above named entity submits this statement for the in the State of Florida.	purpose of changing its registered office or registered agent, or both,
SIGNATURE: KEITH L. STUART	02/14/2008

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: () Delete Title: (X) Change () Addition STUART, KEITH STUART, KEITH L Name: Name: 4463 WEST ROADS DRIVE Address: 4463 WEST ROADS DRIVE Address: City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: WEST PALM BEACH, FL 33407 Title: VΡ () Delete Title: VSD (X) Change () Addition GRANATA, JOHN Name: Name: STUART, LYNN Address: 4463 WEST ROADS DRIVE Address: 4463 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 WEST PALM BEACH, FL 33407 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition STUART, LYNN Name: Name: 4463 WEST ROADS DRIVE Address: Address: City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: Title: VΡ (X) Delete Title: () Change () Addition CLARK, BRUYN Name: Name: 4463 WEST ROADS DRIVE Address: Address: City-St-Zip: WEST PALM BEACH, FL 33407 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: KEITH L. STUART PD 02/14/2008