

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000012778

Entity Name: A-2-Z POOL SERVICE, INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3212 MEMORY LANE  
FORT PIERCE, FL 34981

**New Principal Place of Business:**

**Current Mailing Address:**

3212 MEMORY LANE  
FORT PIERCE, FL 34981

**New Mailing Address:**

FEI Number: 20-8603616

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LALOTA, MICHAEL  
3212 MEMORY LANE  
FORT PIERCE, FL 34981 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: MR  
Name: MICHAEL, VINCENT LALOTA  
Address: 3212 MEMORY LANE  
City-St-Zip: FT PIERCE, FL 34981

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL LALOTA

MR

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date