

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000092278

**FILED**  
**Oct 14, 2009**  
**Secretary of State**

**Entity Name:** AAA ABBOTT POOL SERVICE INC

**Current Principal Place of Business:**

41645 ROYAL TRAILS RD  
EUSTIS, FL 32736 US

**New Principal Place of Business:**

**Current Mailing Address:**

41645 ROYAL TRAILS RD  
EUSTIS, FL 32736 US

**New Mailing Address:**

**FEI Number:** 26-0724508      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SCRIMA, JOAN  
41645 ROYAL TRAILS RD  
EUSTIS, FL 32736 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: JOAN SCRIMA

\_\_\_\_\_  
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:**

Title: P ( ) Delete  
Name: SCRIMA, VINCENT J SR  
Address: 41645 ROYAL TRAILS RD  
City-St-Zip: EUSTIS, FL 32736 US

Title: TR ( ) Delete  
Name: SCRIMA, JOAN A  
Address: 41645 ROYAL TRAILS RD  
City-St-Zip: EUSTIS, FL 32736 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPST (X) Change ( ) Addition  
Name: SCRIMA, JOAN A  
Address: 41645 ROYAL TRAILS RD  
City-St-Zip: EUSTIS, FL 32736 US

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: JOAN SCRIMA

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

VPST

10/14/2009

\_\_\_\_\_  
Date